

RockSport Indoor Climbing Center

CHANGE OF MEMBERSHIP FORM

CURRENT MEMBERSHIP TYPE:

Please circle one: Junior Student Individual Family Corporate
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Member's Name
Account Owner's Name
Home # ()

Additional Members
Additional Members
Work # ()

TYPE OF MEMBERSHIP CHANGE:

Please circle one: Additional Members Membership Type Freeze* Cancellation Rate Change

Staff Name

Manager Approval

REASON FOR CHANGE:

*Freeze Request Account will be automatically billed \$8 per person on the account until membership is canceled or unfrozen.	
Account Owner's Signature	Date

CANCELLATION REQUEST:

Account Owner's Signature	Date
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RockSport

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