



Member Profile

Thank you for completing this member profile. Knowing a little bit about you and your family will help us make your experience at the Durango Mountain Club truly memorable and fun!

1. Overall Member Information

Primary Member: _____

Address: _____

Street

City

State

Zip

Home Telephone #: _____ Mobile Phone #: _____

Home E-Mail Address: _____

Social Security # _____ Date of Birth _____

Wedding Anniversary Date _____

Name of Employer _____

Occupation and/or Nature of Business _____

Title _____ Years in Present Employment _____

Business Address _____

Street

City

State

Zip

Business Telephone # _____ Fax # _____

Business E-Mail Address _____

SPOUSE INFORMATION

Spouse's Name _____
Social Security # _____ Date of Birth _____
Name of Employer _____
Occupation and/or Nature of Business _____
Title _____ Years in Present Employment _____
Business Address _____
Street _____
City _____ State _____ Zip _____
Business Telephone # _____ Fax # _____
Business E-Mail Address _____

DEPENDENT INFORMATION

Unmarried children who are under the age of twenty-three and either living in the Applicant's home or attending school on a full-time basis:

| | <u>Name (First & Last)</u> | <u>Date of Birth</u> | <u>Male</u> | <u>Female</u> |
|----|--------------------------------|----------------------|-------------|---------------|
| 1. | _____ | _____ | _____ | _____ |
| 2. | _____ | _____ | _____ | _____ |
| 3. | _____ | _____ | _____ | _____ |
| 4. | _____ | _____ | _____ | _____ |

3. Billing

Please Mail DMMA Billings To: Home Address Business

Please Mail All Other DMMA Correspondence To: Home Address Business

Name On Credit Card: _____

Billing Address: _____

Credit Card Number: _____

Expiration Date: _____ 3 Digit Security Code: _____

Type of Credit Card: MC _____ VISA _____ DISCOVER _____ AMEX _____

4. Family Preferences

How many times per year do you plan on visiting Durango Mountain Resort? _____

How do you typically travel to Durango (i.e. flights, drive route, etc.)? _____

Would you rent a car or use DMR transportation when you arrive? _____

Will you bring the family pet when visiting? No Yes / Pet's name _____

| Adult #1 Name: | | Adult #2 Name: | |
|--|--|--|--|
| <i>Birthday</i> | | <i>Birthday</i> | |
| <i>Favorite Summer Activity at DMR</i> | | <i>Favorite Summer Activity at DMR</i> | |
| <i>Favorite Winter Activity at DMR</i> | | <i>Favorite Winter Activity at DMR</i> | |
| <i>Skier / Snowboarder</i> | | <i>Skier / Snowboarder</i> | |
| <i>Interests</i> | | <i>Interests</i> | |
| <i>Favorite: Wines, Foods, Movies, Music, Books, Magazines, , Sports Teams</i> | | <i>Favorite: Wines, Foods, Movies, Music, Books, Magazines, , Sports Teams</i> | |
| <i>Special Need / Request</i> | | <i>Special Need / Request</i> | |

| Child #1 Name: | | Child #2 Name: | |
|--|--|--|--|
| <i>Birthday</i> | | <i>Birthday</i> | |
| <i>Favorite Summer Activity at DMR</i> | | <i>Favorite Summer Activity at DMR</i> | |
| <i>Favorite Winter Activity at DMR</i> | | <i>Favorite Winter Activity at DMR</i> | |
| <i>Skier / Snowboarder</i> | | <i>Skier / Snowboarder</i> | |
| <i>Interests</i> | | <i>Interests</i> | |
| <i>Favorite: Foods, Movies, Music, Books, Magazines, Games, Game Boy Games, Sports Teams</i> | | <i>Favorite: Foods, Movies, Music, Books, Magazines, Games, Game Boy Games, Sports Teams</i> | |
| <i>Special Need / Request</i> | | <i>Special Need / Request</i> | |

| Child #3 Name: | | Child #4 Name: | |
|--|--|--|--|
| <i>Birthday</i> | | <i>Birthday</i> | |
| <i>Favorite Summer Activity at DMR</i> | | <i>Favorite Summer Activity at DMR</i> | |
| <i>Favorite Winter Activity at DMR</i> | | <i>Favorite Winter Activity at DMR</i> | |
| <i>Skier / Snowboarder</i> | | <i>Skier / Snowboarder</i> | |
| <i>Interests</i> | | <i>Interests</i> | |
| <i>Favorite: Foods, Movies, Music, Books, Magazines, Games, Game Boy Games, Sports Teams</i> | | <i>Favorite: Foods, Movies, Music, Books, Magazines, Games, Game Boy Games, Sports Teams</i> | |
| <i>Special Need / Request</i> | | <i>Special Need / Request</i> | |

Note: Please add more pages to share preferences as necessary.

I authorize and approve of the membership charging privileges identified herein.

Signature

Print Name

Date