VERTICAL ENDEAVORS MEMBE	R AGREEMEN I OFFICE USE ONLY
CASHCHECKC	REDIT CARD CHECK #
	Till Receipt #
Type of yearly member (circle one): CURRENT	Employee Name
Do you have an existing EFT Monthly Membersh	o? YES / NO Notes:
Which VE location will you climb at m	re often:
St. Paul / Mpls / Bloomington / TC Bouldering / Dulu	n / Glendale Heights
Dates of Membershipto_	
NAMEPLEASE PRINT LEGIBILY - we will be mailing your pas	
STREET	
CITYSTATE	ZIP ALL ACCESS MEMBERSHIPS
HOME ()CELL ()	1 Adult (\$430.42) \$
EMAIL	2 Adult (\$860.84) \$
(Vertical Endeavors will not sell your email address)	1 Adult + 1 Child (\$592.23) \$
Female / Male BIRTH DATE	AGE 1 Adult + 2 Children(\$754.04) \$
How did you hear about us? (circle one):  Postcard / Staff / Friend / Email / Internet / REI / Midwest /	Family Membership (\$889.97) \$   Dther
Family Memberships: Please complete the follo	wing Person to be notified in case of illness or injury
Dependent's Full Name Birth Date	NAME:
	PHONE #
	CELL #
	WORK #
	Do you have medical insurance? YES / NO
AGREEMENT	Do you have any medical conditions? YES / NO If so, what are they?
1. All sales final, no refunds.	
<ul> <li>2. I have signed an "Assumption of Risk" waiver and rules form.</li> <li>3. Participation in this sport or facility involves certain risks and I agree to</li> <li>4. The information I have provided on this form is current, factual and com</li> <li>5. Members must show their membership key tags when entering the facility</li> </ul>	ete.
<ul> <li>6. I understand this membership is non-transferable.</li> <li>7. All membership contracts begin on the day of payment or at the end of 8. I agree to pay a \$5.00 replacement cost for a new membership key tag</li> <li>9. I understand that this memberships will not be suspended or put on ho</li> <li>10. Definition of FAMILY Membership is: Parents and children under the a</li> </ul>	lost or stolen. for any reason due to injury, accident, relocation or pregnancy.
11. All <b>CHILD</b> memberships must follow the contract dates of the ADULT 12. As a member of VE you are eligible for a 15% discount on regular pric 13. Members are eligible for event and clinic discounts.  14. I understand that the facility may be closed on occasion for private events.	embership. I pro-shop items.
My signature indicates that I have read, understand and agree to	
Signature:	_
(Parent or Legal Guardian, if participant is under 18 years of age)	Date: