



Yarnell Regional Community Center

**Membership Application**

\$15 per person  
— Free if 75 years of age or older —

Date: \_\_\_/\_\_\_/20\_\_\_ Regular Membership —  New  Renewal For Year 20\_\_\_

Supportive Membership —  New  Renewal For Year 20\_\_\_

Name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Activities I would be interested in helping with:

Thrift Store  Kitchen  Dining room Desk  Dining Room Floor

Facilities  MOW Driver  Event Setup/Cleanup  Website

Other: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

Received by: \_\_\_\_\_ Date: \_\_\_/\_\_\_/20\_\_\_

Amount Received: \$\_\_\_\_\_  Cash  Check # \_\_\_\_\_

----- *Cut Here* -----

Yarnell Regional Community Center

**Membership Dues Receipt**

Received of: \_\_\_\_\_ For: 20\_\_\_  Regular Membership

Supportive Membership

Date: \_\_\_\_\_ Amount: \$\_\_\_\_\_

Received by: (YRCC member) \_\_\_\_\_ Date: \_\_\_/\_\_\_/20\_\_\_