



## PARK MEMBERSHIP RENEWAL APPLICATION

PLEASE PRINT - (Primary Membership Card Holder)

(\*\*Note: information must be filled out completely for processing.)

MEMBER ID: \_\_\_\_\_  
First Middle Last

NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHYSICAL ADDRESS (if different from mailing address): \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE: (Area Code) \_\_\_\_\_ DRIVER'S LICENSE (State & #): \_\_\_\_\_

BIRTHDAY (Month/Day/Year): \_\_\_\_\_ E-MAIL ADDRESS:

\_\_\_\_\_



\* RRMT, Inc. will correspond with you via TEXT and/or EMAIL regarding appointments, birthdays, RV/Cabin reservations, park newsletter, membership renewal, etc. By listing your email address & phone number, you are consenting to receiving information from RRMT, Inc. via this communication method.

Please list CELL PHONE # where you can receive TEXTS:

\_\_\_\_\_

\* If applicable, please be sure to take into account any minor children you have and their birthdates for the new calendar year. Are they 18 now? Then they would need their own ADVENTURER Membership. Or are any of your children 10 now? Then they will need their own RANGER Membership. Furthermore, are there any additional family members that need to be added to your account? If so, please use the lines below to elaborate:

### FAMILY MEMBERS' INFORMATION

NAME	RELATIONSHIP	BIRTHDAY (Month/Day/Year)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please indicate which memberships you will be renewing for the 2018 calendar year below by circling all that apply & then indicating the # quantity of memberships:

**RRMT, Inc. memberships are valid from January 1 – December 31 each year.**

**Lone Star Excursion Membership \$250.00**

**Adventurer Membership \$125.00**

# of Lone Star Excursions Purchased \_\_\_\_\_

# of Adventurers Purchased \_\_\_\_\_

**Ranger Membership \$75.00 # of Rangers Purchased \_\_\_\_\_**

Please denote below the individuals' names associated with each membership you renewed and/or added:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

RRMT, Inc. established in 1972 is a privately owned family-oriented recreational park. Rules & regulations have been set forth and members have been given a copy of these rules. RRMT, Inc. reserves the right to refuse admission to anyone. It is the responsibility of RRMT, Inc. members to know the rules and adhere by them. Members habitually refusing to adhere to the park rules will be barred from the RRMT, Inc. Park. Parents of minor children will be held responsible for making their children aware of the park rules. Park hours of opening and closing will be strictly adhered to and members habitually leaving the park after closing hours will be barred from the park.

**SPEED LIMITS WILL BE STRICTLY ENFORCED IN DESIGNATED CAMP AREAS - NO EXCUSES ACCEPTED. INTOXICATED, RUDE, OR VERBALLY ABUSIVE CUSTOMERS WILL BE ASKED TO LEAVE AND WILL BE BARRED FROM THE PARK.**

**MEMBERS CAUGHT RIDING BEFORE OR AFTER CLOSING HOURS WILL AUTOMATICALLY BE BARRED FROM THE PARK-NO QUESTIONS ASKED - NO EXCUSES ACCEPTED!! (If there are breakdowns on trails causing persons to be late) PARK OFFICE SHOULD BE NOTIFIED IMMEDIATELY!!!**

RRMT, Inc. strives to provide a safe and friendly environment for family fun and recreation. Members are allowed to invite guests, but will be held responsible for guests knowing and abiding by all park rules.

**ACKNOWLEDGEMENT:**

At this time, I (We) would like to renew our RRMT, Inc. Membership(s). I (We) have read the membership criteria and the park rules and understand that our membership can be revoked at anytime due to family members not adhering to all park rules.

\_\_\_\_\_  
Print (Primary Membership Card Holder)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature (Primary Membership Card Holder)

\_\_\_\_\_  
Date

**YOU WILL BE ASKED TO PRESENT YOUR MEMBERSHIP CARD ON EACH VISIT TO THE PARK.**

**FOR PARK USE ONLY:**

Date of Renewal \_\_\_\_\_

Membership Renewal Granted on \_\_\_\_\_

Total 2018 Membership Package Cost: \_\_\_\_\_