Kermit M. Rudolf Fitness Center
Renewing Membership Application

Date: ____________

Please print the following information and return it to the Kermit M. Rudolf Fitness Center. If you have any questions, please call (509) 313-3974.

Title: (circle one) Dr. Mr. Mrs. Ms.

Renewing Member: ______________________  ______________________
  Last   First   MI   ID Number

Spouse/Domestic Partner: ____________________________

Spouse ID Number: ________________  Employee / Student (circle one)
Law, Grad or Undergrad (circle one)

Email Address: ____________________________

Home Phone:_____________  Work Phone:_____________

Dependent: ______________________  Age: ________
Dependent: ______________________  Age: ________

Membership Type: (There is a No Refund Policy for all memberships)

☐ Fall or Spring Spouse/Dom. Part. for Law, Grad or Faculty/Staff $150/semester $75(8th week)
☐ Fall or Spring Family for Law, Grad or Faculty/Staff $200/semester $100(8th week)
☐ Summer Spouse/Dom. Part. for Law, Grad or Faculty/Staff $30/semester
☐ Summer Family Law, Grad or Faculty/Staff $40/semester

In case of emergency contact: ______________________  Phone: ______________

Modified 4-11-2007

For RFC Professional Only

Witness:  Date: