

VIP PASS APPLICATION

MEMBERSHIP INFORMATION

Name *

First Name

Last Name

Address

Street Address

Street Address Line 2

City

State / Province

Postal / Zip Code

Email

example@example.com

Phone Number

Area Code

Phone Number

Vehicle Make:

Vehicle Model:

Vehicle Year:

Vehicle Color:

License Plate #:

License Plate State:

ADDITIONAL VEHICLES: Family Memberships Available for the Xtreme Wash Membership ONLY. First Vehicle/Member only \$38 a Month, Each Additional Vehicle/Member only \$29 per Month (tax not included). All Memberships MUST Bill on the same Credit Card. Additional Vehicles Require Their Own Membership Form to be filled out.

Credit Card Billing Information

(If different from above)

Name

First Name

Last Name

Address

Street Address

Street Address Line 2

City

State / Province

Postal / Zip Code

Receipt Barcode #:

RHD Tag:

Receipt Barcode # and RHD Tag will be issued in person at The Wash at Galloway

FOR INTERNAL USE ONLY

Entered By:

Date of Membership Sign Up: