



TEENS 14-18 Years of Age

Earn-A-Membership Certification

The Earn-A-Membership program is available for Columbia residents who live on property subject to the CA lien and whose household income is within the Columbia Association guidelines.

Name _____

Phone Number (Primary) _____

Phone Number (Alternate) _____

Street address _____

City _____

State, Zip _____

Village _____

Columbia Association INCOME GUIDELINES

The Columbia Association Low/Moderate Income Guidelines are based on federal guidelines developed by HUD.

Family Size	Gross Income
2	\$66,550
3	\$73,000
4	\$79,400
5	\$84,600
6	\$89,750
7	\$94,900
8	\$100,050

Parent(s)/Guardian(s)

Name _____

Name _____

Phone number (Home) _____

Phone number (Home) _____

Phone number (Work) _____

Phone number (Work) _____

Street address _____

Street address _____

City _____

City _____

State, Zip _____

State, Zip _____

Parents Annual Gross Income from all Sources _____

SUPPORTING DOCUMENTATION REQUIRED

- Income Verification
 - Residents who receive government assistance (TCA, DEEP, public housing, Section 8 housing, Medicaid, SSI, SSDI) may provide a current statement of benefits from the Howard County government, or appropriate governmental agency.
 - All other applicants must provide an official IRS computer generated transcript of 2010 tax return (it must include the annual income, number of exceptions, and must include the cover letter or be stamped or signed by the IRS). This transcript is available at no charge and can be requested by calling 1-800-908-9946 or online at www.irs.gov.
- Copies of birth certificate or legal guardianship papers for child listed as a dependent.

I understand that approval of this application depends on my ability to comply with Columbia Association Residency and Income Verification requirements.

SUPPLYING OF FALSE INCOME TAX INFORMATION IS A CRIME PUNISHABLE BY LAW.

Memberships must be activated within one year of the approval for issuance of the membership. The Columbia Association Earn-A-Membership Program is an attempt to make all recreational facilities available to all Columbia residents, regardless of income.

Earn-A-Membership Certification for **TEENS** 14-18 Years of Age

I desire membership for:

- Package Plan Individual
- Outdoor Pools Individual
- Individual Facility Individual

Specify Facility _____

I had membership in this facility previously Yes Membership Number _____ No

Can assist with: (Please check one or more)

- Chaperone/help at an event Deliver Flyers, etc. Recreation Aide
- Cleaning fitness equipment Folding towels Surveys
- Copying Janitorial maintenance/housekeeping Word Processing/Microsoft Office
- Collating/folding/helping with mailings Receptionist/answering phones
- Other (Please list any particular skills that you could provide). _____

Hours/Days available:

Weekdays _____ Evenings _____

Weekends _____ Holidays _____

RELEASE, WAIVER OF LIABILITY AND INDEMNITY AGREEMENT

I hereby agree with the Columbia Association, Inc. (the "Association") to the following by affixing my signature below on this date, _____ 2011.

I verify that the information I have provided on this application is correct and that the IRS documents are valid. I further agree to notify the Columbia Association should my income rise above the limits stated herein before my approved participation is up. I understand that failure to comply with these requirements will result in revocation of my participation privileges and will require payment at regular rates for privileges already used. I have read and agree to all the provisions on this application.

In connection with my participation in the Earn-A-Membership program (the "Program"), I understand and acknowledge the nature and extent of the activities that will be involved in the Program and assume the risk inherent in such activities on behalf of myself. I voluntarily waive any and all claims, costs, liabilities, expenses (including attorney's fees), and judgments against the Association, its directors, officers, employees, servants, subcontractors and agents and hereby release, excuse and discharge the Association, its directors, officers, employees, servants, subcontractors and agents from all claims, cost, liabilities, expenses (including attorney's fees), and judgments which may arise out of my participation in the Program and all aspects attendant thereto. The undersigned further agree(s) to indemnify and hold the Association, its directors, officers, employees, servants, subcontractors and agents harmless from any and all claims, damages, actions, liabilities, expenses (including attorneys fees) and judgments which may arise out of my participation in the Program.

Signature of Member/Participant

Date

Print Name

I am the parent or legal guardian of the minor applicant. I am signing this agreement on behalf of said minor and acknowledge that in so doing, I am giving up legal rights and remedies that I, my spouse, a legal guardian for the minor or the minor might have now or in the future.

Signature of Parent/Guardian

Date

Print Name of Parent/Guardian

Approved, Michelle Miller, Director Community Services

Date

