

CERTIFIED PARK OPERATOR (CPO) ENROLLMENT FORM



- Initial Certification**
\$100 ARVC Members
\$125 Non-members

- Recertification**
\$75 ARVC Members
\$100 Non-Members

*** Use a separate form for each registrant ***

Name: _____

Park Name: _____

Address: _____

Phone: _____ Fax: _____

E-mail: _____

METHOD OF PAYMENT

Check (Payable to ARVC -- send via mail with a copy of this form)

MasterCard VISA American Express

Card Number: _____ Expiration Date: _____

Security Code (3 digit code on back of card for MC/Visa; 4 digit code on card front for AmEx): _____

Name on Card: _____

Credit Card Billing Address: _____

Signature of Cardholder: _____



*This completed form can be faxed to 303-681-0426 or mailed to:
CPO Program, ARVC, 455 Tenderfoot Drive, Larkspur, CO 80118
For questions, call 303-681-0401, ext. 18 or email csmith@arvc.org*