



RMCWA Membership Survey and Application

Survey

Tell us a little about you and your operations:

1. Do you belong to other industry associations? Yes No
If yes, please list. _____
2. Were you previously a member of WCA and/or RWMCA? Yes No
If yes, when was your last membership year? _____
3. Are you a current participant in the Western Carwash Insurance group program? Yes No
4. Is the car washing business your primary business? Yes No
If not what is? _____
5. What kind of operation do you have? Conveyor Self Serve Exterior Roll Over
 In-Bay Automatic Detail Shop Service Stations & C-Stores with In-Bay
Automatics
6. How many self serve bays do you operate? _____
7. Do you have more than one location? Yes No
If yes, how many? Self-Serve Conveyor
8. What other profit centers do you have at your facility, i.e., gasoline, detailing, c-stores, etc.?

Membership Application

Member Information:

Car wash firm name.

D.B.A.

Owner/contact person

Address

City State Zip code

Phone Fax

E-mail for our members e-mail alert system

Website

Complete and return the application with your payment to:

Rocky Mountain Car Wash Association

Attn: Barry Hillegas

P.O. Box 370831

Denver, CO 80237