



Rimrock Cabin Owners Association &

National Forest Homeowners / Washington State Forest Homeowners Association

MEMBERSHIP APPLICATION & RENEWAL FORM

This form can also be used to provide updated contact information in the event of an emergency with or at your cabins or tracts.

DUE JULY 31, 2026

Date: _____

Name / Tract: _____

Spouse / Co-owner: _____

Mailing Address: _____

City / State / Zip code: _____

Home Phone #: _____ Mobile #: _____

Cabin Phone #: _____ Work #: _____

Email: _____

PLEASE PRINT

NEW PAYMENT OPTIONS:

R.C.O.A. now has a website and online membership management with credit card payment options for your convenience. There will be a small fee added for credit card processing to help cover associated costs.

Go to: WWW.RCOAWA.ORG/MEMBERSHIP, click on the membership type and fill out the form.

Tract Name: _____ Lot #: _____

Individual Membership (\$75)..... \$ _____
(\$ includes \$55 for NFH, \$5.50 for WSFHA, & \$14.50 to RCOA)

Associate Membership (\$55)..... \$ _____ (Please complete reverse side)
(\$ includes \$35 for NFH, \$5.50 for WSFHA, & \$14.50 to RCOA)

RCOA Defense Fund Donation
Suggested - \$50 \$ _____

CHECK ENCLOSED TOTAL \$ _____

Individual vs Associate:

Individual or regular membership is for the cabin owner(s). Associate is for other family members or friends who should be kept informed about actions affecting the cabins.

Mail payments to:

Rimrock Cabin Owners Association
141 Scoggin Ln.
Yakima, WA 98908

QUESTIONS?

Call (509)406-4971 or email president@rcoawa.org

This information will be shared with the Yakima County Sheriff's office for use in emergencies.

ASSOCIATE MEMBERSHIP APPLICATION & RENEWAL FORM

Associates are often co-owners, friends or other family members that should be kept informed about actions affecting the cabins.
There are no limits on the number of associates you can have for your cabin. Use a separate sheet of paper if needed.

Associate #1 Name: _____

Mailing Address: _____

City / State / Zip code: _____

Phone #: _____ (Best way to contact you)

Email: _____

Associate #2 Name: _____

Mailing Address: _____

City / State / Zip code: _____

Phone #: _____ (Best way to contact you)

Email: _____

Associate #3 Name: _____

Mailing Address: _____

City / State / Zip code: _____

Phone #: _____ (Best way to contact you)

Email: _____

VOLUNTEER OPPORTUNITIES

- I am interested in serving as a Board Member.
- I am interested in helping with the website and other IT matters.