

# Membership Application / Renewal



Inspiring Powerful Coaching

\* Required fields

\* Name: \_\_\_\_\_

Name Preferred on Name Badge (if different than above): \_\_\_\_\_

Title: \_\_\_\_\_ Company: \_\_\_\_\_

\* Mailing Address: \_\_\_\_\_

\* City/State/Zip: \_\_\_\_\_

\* Day Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

\* Email: \_\_\_\_\_ Website: \_\_\_\_\_

1. Are you a member of the International Coach Federation (ICF)? \_\_\_\_\_ Yes \_\_\_\_\_ No

2. Are you a renewing member of the Denver Coach Federation (DCF)? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, what year did you join? \_\_\_\_\_ If no, how did you hear about the DCF? \_\_\_\_\_

3. Referred By: \_\_\_\_\_

4. Type of application requested: \_\_\_\_\_ Full (*complete #5*) \_\_\_\_\_ Affiliate \_\_\_\_\_ Student \_\_\_\_\_ Virtual

5. If applying for **FULL** Membership above, please complete all that apply:

a. I am a certified coach as follows (identify all that apply):  
\_\_\_\_ MCC \_\_\_\_ PCC \_\_\_\_ ACC \_\_\_\_ ICF-Accredited Coach Training Program: \_\_\_\_\_

b. I am **enrolled** in the following certification program: \_\_\_\_\_

c. I have **completed** the following recognized coach training schools/programs: \_\_\_\_\_

d. I am **attending** the following recognized coach training schools/programs: \_\_\_\_\_

e. I have ongoing coaching clients and am actively acquiring new coaching clients: \_\_\_\_\_ Yes \_\_\_\_\_ No

6. How do you define your coaching practice? \_\_\_\_\_ Full Time \_\_\_\_\_ Part Time

7. How many years have you been coaching? \_\_\_\_\_

8. What is your coaching niche/specialty? Check all that apply.

- |                          |                        |                     |
|--------------------------|------------------------|---------------------|
| ____ Executive/Corporate | ____ Personal/Life     | ____ Spiritual      |
| ____ Health/Wellness     | ____ Career/Transition | ____ Small Business |
| ____ Family/Relationship | ____ Teen/Elderly      |                     |
| ____ Other _____         |                        |                     |

9. Volunteering in the DCF, although optional, is an excellent way to network and remain connected with our coaching community. How will you serve this organization (check all that apply)?

- |                           |                          |                                   |
|---------------------------|--------------------------|-----------------------------------|
| ____ Membership Committee | ____ Marketing Committee | ____ Education/Programs Committee |
| ____ Welcoming Committee  | ____ Social Committee    | ____ Resource Library             |
| ____ Other: _____         |                          |                                   |

10.  \* I authorize you to charge my \_\_\_\_ MasterCard \_\_\_\_ Visa in the amount of \$ \_\_\_\_\_ .

(Full: \$125; Affiliate: \$150; Student: \$90; Virtual: \$90)

\* Name on Card \_\_\_\_\_

\* Credit Card #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ \* Expires: (mo) \_\_\_\_\_ (yr) \_\_\_\_\_

\* Complete billing address: \_\_\_\_\_

\* Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please email this form to [dcf.treasurer@denvercoach.com](mailto:dcf.treasurer@denvercoach.com) or fax to 303.840.5984.

The information in this application is true to the best of my belief.

Signed \_\_\_\_\_

Date \_\_\_\_\_