



**FINANCIAL FITNESS &  
HOMEBUYER EDUCATION  
REGISTRATION FORM**

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

Physical Address: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Program Name: \_\_\_\_\_

Date of Program: \_\_\_\_\_

Number in Household: \_\_\_\_\_ Annual Household Income: \_\_\_\_\_

Income Level:  80% & Below AMI       81-120% AMI       120% & Above AMI

Registration Fee:     \$25  Other \_\_\_\_\_    Date Paid: \_\_\_\_\_

*"Building our Community one home at a time."*

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