

APPLICATION FOR MEMBERSHIP

DATE _____ FEE PAID \$ _____ \$ _____
MEMBERSHIP INITIATION

APPLICANT _____

AGE _____ PHONE _____ CELL _____

EMAIL ADDRESS _____ WANT TO RECEIVE E-NEWSLETTER _____
ADDRESS _____

NO. STREET /PO BOX CITY STATE ZIP

OCCUPATION _____

PHONE _____

BUSINESS

SPOUSE OR FIANCE' NAME _____

OTHER MEMBERS OF HOUSEHOLD:

1. _____ AGE _____
2. _____ AGE _____
3. _____ AGE _____
4. _____ AGE _____

I, OR MEMBERS OF MY FAMILY PLAN TO USE THE FOLLOWING FACILITIES:

CAMPING _____ TENT _____ TRAILER _____ PICKUP CAMPER _____ RV _____
SWIMMING _____ PICNIC _____ FISHING _____ ARCHERY _____
TRAP _____ RIFLE RANGE _____

I HAVE READ THE RULES FOR GOVERNING CONDUCT BY ME, MEMBERS OF MY FAMILY, GUEST OF MY FAMILY WHILE ON THE FARM AND WILL BE RESPONSIBLE FOR THEIR ACTIONS.

MY HUNTING/FISHING LICENSE NUMBER IS _____
APPLICATION WILL BE REJECTED WITHOUT VALID LICENSE #

SPONSORED BY _____ SIGNED _____
CLUB MEMBER APPLICANT

FOR CLUB USE: