

Looking Glass River Sportsman Club New Member Application



I, the undersigned, do hereby make application for membership with the Looking Glass River Sportsman Club.

Primary Applicant Name:		Date:				
Spouse Name:						
Street Address:						
City:	State:	ZIP:				
Primary Applicant Phone:		Spouse Phone:				
Primary Applicant E-mail:		Spouse E-mail:				
Occupation:						
Special Skills/Knowledge/Certifications:						
Interests Include (circle all that apply):						
Pistol	Rifle	Shotgun	Traditional Archery	Compound Archery	Hunting	Hunting Dogs
Other (specify):						
Primary Applicant Signature:						
Spouse Signature:						
Current Sponsoring Member Name*:						
Current Sponsoring Member Signature:						

**If no sponsoring member, applicant must be interviewed by a board member.*

CPL Holder?	Yes	No	If yes, CPL #	Exp Date:
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If no CPL, permission to conduct background check? Yes No

New Member Requirements

- All club members must be at least 18 years old
- All new members must complete the new member orientation program prior to receiving their membership card
- All members must have signed LGRSC's Waiver of Release and Liability which will be retained on file
- All applicants must attend a regularly scheduled board meeting.
- All board meetings are held on the 2nd Sunday of each month at 6:30 PM, unless otherwise noted. At this time applicants will:
 - Complete orientation (informal interview and tour of the facility)
 - Pay membership fees as calculated below
 - Provide a brief introduction to all meeting attendees
 - Receive approval for membership and membership card

New Member Fees

- Regular Membership (Under age 65); Jan 1 – Aug 31 \$100
- Regular Membership (Under age 65); Sept 1 – Dec 31 \$60
- Senior Membership (Age 65+); Jan 1 – Sept 30 \$80
- Senior Membership (Age 65+); Sept 1 – Dec 31 \$50
- Spouse Fee (full club member with voting rights) \$10
- New Member Initiation Fee \$20

LGRSC Use Only:		Amount Received:
<input type="checkbox"/> Cash/Check # _____	<input type="checkbox"/> Card issued	\$ _____
Date Processed: _____	Processed by: _____	