

# MEMBERSHIP APPLICATION ↓



Send completed application and

Check Payable to:.....

Canastota Conservation Club

1873 Hill Street

Chittenango NY 13037

Name \_\_\_\_\_ Phone (    ) \_\_\_\_\_

Street Address: \_\_\_\_\_ Email: \_\_\_\_\_ @ \_\_\_\_\_

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

Employment/Profession \_\_\_\_\_

What other clubs do you belong to ? \_\_\_\_\_

What types of firearms do you practice with? \_\_\_\_\_

NRA Member? (Y/N) \_\_\_\_\_ Interested in joining?( Y/N) \_\_\_\_\_

Vehicle You will usually drive to the club ? Make \_\_\_\_\_ Mod-  
el: \_\_\_\_\_ Plate \_\_\_\_\_

**MEMBERSHIP DUES ARE : \$120.00 / YEAR**

## SIGNATURES:

I UNDERSTAND I MUST OBEY ALL SAFETY RULES OF THE CLUB

APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

CLUB MEMBER AND SPONSOR: x \_\_\_\_\_ DATE: \_\_\_\_\_

AUTHORIZING MEMBER: x \_\_\_\_\_ DATE: \_\_\_\_\_