



**WETHERSFIELD GAME CLUB, INC.
APPLICATION FOR MEMBERSHIP**

PLEASE PRINT

NAME: _____ **DATE:** _____

STREET: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

DATE OF BIRTH: _____ **PHONE NO.** _____

OCCUPATION: _____

EMPLOYER: _____

BUSINESS PHONE: _____ **EMAIL ADDRESS:** _____

GAME CLUB MEMBER SPONSORS (NAMES):

1. NAME: _____ **SIGNATURE:** _____

2. NAME: _____ **SIGNATURE:** _____

3. NAME: _____ **SIGNATURE:** _____

PERSONAL REFERENCES (NAMES & ADDRESSES):

1. _____

2. _____

3. _____

**I HEREBY APPLY FOR MEMBERSHIP IN THE WETHERSFIELD GAME CLUB, INC. AND
IF ACCEPTED, AGREE TO ABIDE BY ITS' BY-LAWS AND REGULATIONS.**

***** PLEASE PROVIDE US WITH A COPY OF YOUR DRIVERS LICENSE AND
PISTOL PERMIT AND/OR HUNTING LICENSE *****

SIGNATURE: _____

PRESENTED BY: NAME: _____ **SIGNATURE:** _____

TYPE OF MEMBERSHIP:

SOCIAL: _____ **REGULAR:** _____ **JUNIOR:** _____

MEMBERSHIP COMMITTEE: _____

DATE ACCEPTED: _____

1. _____

2. _____

3. _____