

----- **Harvard Sportsmen's Club** -----  
Membership Application

**NOTE:**

- Please complete this form in its entirety. Include **your Sponsor's Name**. A sponsor who will appear with you at the meeting is required.
- Bring cash, check or PMO payable to "Harvard Sportsmen's Club" for the correct amount as determined below.
- You must also attend a **Safety Orientation / Briefing** usually held at 8:30 AM on the Sunday after the Board Meeting. Your membership card and gate card will be mailed to you **after** these requirements are met.

**Interests..Please check all that apply.**

Grounds maintenance     IPSC (USPSA) Action Shooting     Archery     Black Powder     Bullseye     IDPA  
 Construction projects     Class III     Biathlon     Kitchen     Conservation     Cowboy Action Shooting  
 Shotgun     Training Classes     Fishing     Youth Groups     Other \_\_\_\_\_

**MEMBERSHIP FEES:**

**TOTALS**

**Initiation Fee-** One time fee of \$150

\_ \$150 \_

**Yearly Dues-**

**Senior..** : \$150 \_\_ Age 18 & up \_\_\_\_ (prorated from September to February)\_\_\_\_\_

**Student..** : \$15 - Age 18-23; requires proof of full-time student enrollment\_\_\_\_\_

**Others you can add to your membership:**

**Associate (for your Spouse) ..** : \$15

**NAME:** \_\_\_\_\_

**Junior (s) ..** : \$15 ..Age 10-17 Member is a parent, grandparent or guardian who has completed the Junior Liability Form.

**NAME(S):** \_\_\_\_\_ **Birth Date (s):** \_\_\_\_\_

**Total Payable to the Harvard Sportsmen's Club**

\_\_\_\_\_

- NOTE: Annual dues are due by the February Annual Membership Meeting. You will receive a renewal form by mail.**

I, the undersigned Applicant, do apply for membership in the Harvard Sportsmen's Club, Inc., and do hereby agree, if accepted, to abide by the by-laws of said organization and to govern my behavior as a sportsman as defined in Article II of the by-laws, and to observe all club safety rules.

**PLEASE WRITE CLEARLY SO YOUR DATABASE ENTRY WILL BE CORRECT!**

**Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Mailing Address:**

**Street or PO Box:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Vehicle License Plate #:** \_\_\_\_\_ **Sponsor's Name:** \_\_\_\_\_

\_\_\_ Yes \_\_\_ No I would like to personally receive campaign/political mailings from those running for office or supporting a particular position. I agree that those individuals will be provided with my mailing and email addresses.

**SIGNATURE:** \_\_\_\_\_