



For club use only:	
Member Number	_____
Date Approved	_____
Payment Method	_____
Range Auth.	_____
Liability Waiver	_____

Fitchburg Sportsmen's Club at Swallow Hill
PO BOX 594 – Fitchburg MA 01420 – www.fitchburgsportsmensclub.org
 New Member Application effective 2015

Name: _____

Address: _____

Phone Number: _____ Date of Birth: _____ Age: _____

Email Address: _____

Our newsletter is delivered via email – please be sure to provide an email address and print clearly.

Club Affiliations (Goal/NRA/Other): _____

Proposed by (not required): _____

Occupation/Areas of interest: _____

Membership Level	Fee (includes \$10.00 initiation fee)	Check below
Junior (Ages 15 to 17)	\$45.00	_____
Regular (Ages 18 to 64)	\$75.00	_____
Senior (Age 65 and over)	\$50.00	_____
Senior Family (Age 65 and over plus spouse)	\$70.00	_____
Family (Two adults and children under 15)	\$95.00	_____

If selecting a family membership please provide:

Spouse Name: _____ Spouse Date of Birth: _____

Appropriate membership fee including initiation fee must accompany this application. These monies will apply as my dues payment for the remainder of the calendar year. Dues are paid on an annual basis and are due prior to the Annual Meeting in March of each year. If I am accepted as a member of the Fitchburg Sportsmen's Club, Inc., I will obey the Fish and Game laws everywhere. I will also obey the By-Laws, Range rules, and other regulations of the club.

Applicant Signature _____ Date: _____