Connecticut River Sportsmen's Club, Inc PO Box 10122, 125 Whitcomb Rd, Swanzey, NH 03446

Membership type: Individual / Fa		SHIP RENEWAL FORM Seniors (65+) \$75	YEAR: dob/_	/	
		APPLICANT INFOR	MATION		
Applicant's Name:					
INDICATE ANY CHANGES T	O THE INFO	ORMATION BELOW:			
Residence Address:	Street		State	- 7in	
Mailing address: (if diffe	erent from abo	ove)			
	City		State	Zip	
Telephone #:					
Email address:			Send New	vsletter to this address?	Yes / No
License Plate #:	State				
	l, expelled, or a nter safety pro	sked to give up your men gram or other gun safety	nbership in an program? No/	y way by another Sporting (Yes (please provide details)	Club? No/Yes
In case of emergency, notify: Emergency Telephone #:	<u>EME</u>	RGENCY CONTACT	INFORMAT	<u>ION</u>	
Emergency Telephone #:		Relation	onship:		
	<u>RE</u>	PRESENTATIONS BY	APPLICAN	<u>NT</u>	
As a condition for applying for memb	pership in the C	onnecticut River Sportsme	n's Club, I:		
1. CERTIFY that I am a peorganization that has any people in the control of the c				erica, and that I am not a merited States by force;	nber of any
2. CERTIFY that I am not a defined by the 2nd Amendment			and believe stro	ongly in the rights of individua	als to bear arms as
3. AGREE to be bound by by the Board of Directors of				long with any directives and s	afety rules approved
4. UNDERSTAND that I h	ave not been gr	anted membership until the	Board of Direc	ctors has reviewed and approv	red this application;
5. UNDERSTAND that such review may, but not necessarily, include requiring me to participate in a Club approved safety program;					
6. UNDERSTAND that the	Club reserves	the right to protect its prope	erty by use of s	urveillance;	
7. ACKNOWLEDGE and a dangerous and involve the	agree that the acrisk of serious i	ctivities that take place on t njury and/or death and that	he property of t the signer has i	he Connecticut River Sportsn read and signed this Represent	nen's Club can be tation voluntarily.
Printed Name:		Date:			
Signature:					
AREAS OF INTEREST					
□ Archery □ □ P	istol	□□□Rifle	□Other		
(office use only)					

Amt received: _____ Check #: _____ Sold by: _____