



# Camillus Sportsmen's Club, Inc.

PO Box 164, Camillus, N.Y. 13031

## APPLICATION for MEMBERSHIP

Club use  
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\* Required - (Please Print Legibly)

Full Name: \* \_\_\_\_\_ Member Number \_\_\_\_\_

Address: \* \_\_\_\_\_

City: \* \_\_\_\_\_ State: \* \_\_\_\_\_ Zip: \* \_\_\_\_\_

Date of Birth: \* \_\_\_\_\_ Phone: \* \_\_\_\_\_

Email: \* \_\_\_\_\_ NRA Member: YES  NO

Emergency Phone: \* \_\_\_\_\_ Occupation: \_\_\_\_\_

Family Membership- Children up to 18yr.  
Membership Jan 1st to Dec 31st  
Senior Rate is age 65 & older.

| √ ,HOW CAN YOU HELP OUR CLUB |            |                          |            |
|------------------------------|------------|--------------------------|------------|
| <input type="checkbox"/>     | Carpentry  | <input type="checkbox"/> | IT         |
| <input type="checkbox"/>     | Plumbing   | <input type="checkbox"/> | Accounting |
| <input type="checkbox"/>     | Electrical | <input type="checkbox"/> |            |
| <input type="checkbox"/>     | Masonry    | <input type="checkbox"/> |            |
| <input type="checkbox"/>     | Mechanical | <input type="checkbox"/> |            |
| <input type="checkbox"/>     |            | <input type="checkbox"/> |            |

Renewal Membership Fee:

Standard ..... \$100       Senior..... \$50

(Applicant Statement)

*I hereby apply for Club membership renewal and agree to abide by the range rules, bylaws, and constitution of the Camillus Sportsmen's Club, Inc. I further state that I have been made aware of these requirements and that any violation thereof may result in loss of membership. I understand the hazardous nature of firearms operation and acknowledge the risk of injury associated with the use of a firing range. I agree to assume all responsibility for the safe operation and usage of any firearm or ammunition in my possession and that I will not hold the Club responsible in any manner for actions of others that result in personal property damage or personal injury.*

Applicant Signature: \* \_\_\_\_\_ Date: \_\_\_\_\_

Club Representative: \_\_\_\_\_ Date: \_\_\_\_\_