

GRENVILLE



FISH & GAME CLUB

www.grenvillefishandgame.com

613-213-1005

2596 Campbell Rd North, Prescott ON KOE 1T0

NEW MEMBERSHIP APPLICATION

Applicant Name: _____ **PAL#** _____

Complete Mailing Address: _____

City: _____ **Postal Code:** _____

Home Telephone: _____ **Business Telephone:** _____

E-mail Address: _____

If wishing to make a donation, please indicate amount here = \$ _____

Single Membership \$83.75 + Admin Fee \$25 + HST \$16.25 + OFAH \$45.00 = \$170.00 \$ _____

Family Membership \$83.75 + Admin Fee \$25 + HST \$16.25 + OFAH \$55.00 = \$180.00 \$ _____

Indoor Range Add \$21.75 + HST \$3.25 (Per Membership) = \$25.00 \$ _____

Total: \$ _____

IF FAMILY MEMBERSHIP IS CHOSEN PLEASE FILL OUT FORM BELOW

(Family Membership is considered You / Spouse and any children under the age of 21)

Spouse Name: _____ **PAL#** _____

Child's Name	Age	DOB YYYY/MM/DD
1		
2		
3		
4		

Are you planning to shoot restricted firearms at this range?: (YES/NO)

(If yes, you must be certified by our Master Range Officer before bringing your restricted firearms to the range.)

Would you be willing to do some volunteer work for the club?: (YES/NO)

You must complete a 20 minute orientation before starting to use the clubs facilities and have read the complete copy of the club's rules & regulations and agreed to abide by them my signing below. (Rules & regulations are posted on our website)

Signature: _____ **Date:** _____

(Note: Membership fee must accompany this application to be considered for membership)

Membership Recommendation: I _____ being a member in good standing, recommend that _____ be considered for membership to the Grenville Fish and Game Club. I am knowledgeable of this applicant and am not aware of any reason(s) which might cause concern by the general membership, for him/her in becoming a probationary member in this club.

Members's Signature: _____ **Date:** _____

Contact Person for Membership

Anne Armstrong

613-658-3084

a.seabrookarmstrong@gmail.com

Date Received: _____ **Amount Paid:** _____

Date Accepted: _____

Revised: Nov.30 2020