

BARTLESVILLE SPORTSMEN'S CLUB, INC PO Box 391 Bartlesville, OK 74005

MEMBERSHIP APPLICATION

Please PRINT Legibly Thank You

Last Name: _____ First Name: _____ Middle Initial: _____

Nickname (If any): _____ Date of Birth: _____

Street or P.O. Box: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Other Phone: _____

Email: _____

Monthly Newsletters are available on the BSC Website (<http://bartlesvillesportsmensclub.org/>)

Do you want a newsletter mailed? **Y** () **N** ()

Membership Renewal: Regular/Single Membership \$50
Or Family Membership – List all family members \$75
(Use back of form if needed)
Associates: _____
Juniors: _____ AMOUNT DUE: _____

New Members: All new members must pay a *Lifetime Initiation Fee* of \$100.00

***Associate Member:** The spouse of a regular member and a regular member's dependents who are over 18 years of age, but under 21 years of age may become Associate Members of the Club, but **MAY NOT** vote on club business.

****Junior Member:** Regular member's dependents that are under 18 years of age and **MUST** be supervised on the firing range by a Regular Member at **ALL TIMES**. Junior Members **MAY NOT** vote on Club business.

Lifetime Initiation Fee (This is a one-time fee paid with your initial application to the Club.) \$100

Regular/Single Membership \$ 50

Family Membership – List all family members – (use back of form if needed) \$ 75

Associate Names: _____

Junior Names: _____

Please choose the appropriate membership fee and add the initiation fee for your total.
Fees are to be submitted with your application. AMOUNT DUE: _____

LIABILITY RELEASE:

I hereby release and discharge the Club, its agents, members, and officers and directors from all claims, actions, demands, and judgments which I, the undersigned participant/parent/legal guardian, may have or claim to have against the Club or its successors and the above identified persons for all personal injuries or death, known or unknown to myself and/or person(s) I am responsible for, and injuries to property, caused by or arising out of the above activity.

I, the undersigned have read this release and understand all their terms. I execute the release voluntarily and with full knowledge of its significance.

Applicant's Signature: _____ Date: _____

***Required for new members only**
Sportsmen's Club Member Sponsor Signature: _____
Printed name: _____

By signing this form you are agreeing to abide by the Safety Rules of the Bartlesville Sportsmen's Club. These rules are available on our website under the Safety tab or copies are available upon request.