

OFFICIAL USE ONLY

Membership Year \_\_\_\_\_

\*Membership Renewal is January 15<sup>th</sup> the following year\*

New Member

Annual Renewal



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Membership Application Reviewed By \_\_\_\_\_

Club Officer \_\_\_\_\_

Pin Number \_\_\_\_\_

Date \_\_\_\_\_

W324 Pearl Street • Oneida, Wisconsin 54155 | Mailing Address • N6434 Oakwood Court • Oneida, WI 54155

**Oneida Sportsmen's Club, Inc. One (1) Year Membership Application**

Applicant's Name (please print): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Your current age: \_\_\_\_\_

Our membership fee is \$40.00 for one (1) year. **No Refunds.** Annual Renewal Date will be January 15<sup>th</sup> of the following year. Before becoming a member, you will be required to review the Club Range rules and sign a copy of the Range Rules with your application.

We welcome you as a new member. Upon completion of the application and reviewing and signing the Range Rules, the membership fee will be collected and you will be provided with a membership card. While on Club grounds **All** members are required to have and show upon request your membership card.

We encourage all of our members to participate and assist us with the numerous duties that ultimately allow us to keep our membership and range fees very affordable and to continue to provide the best experience to our members.

Please answer the following questions and respond as appropriate. Thank you for your anticipated support.

1. Are you interested in helping us with the preparation and operation of scheduled events, such as our annual banquet held the first Friday of October, shooting events, or other events?  Yes  No
2. Will you assist with the necessary maintenance and upkeep of our facility, the grounds and its improvements?  Yes  No
3. Have you ever been convicted of a DNR or Tribal Conservation violation?  Yes  No
4. Have you ever been convicted of a Felony?  Yes  No If yes, please explain below.

5. I certify that I will abide by all applicable Federal, State, and local laws, as well as the Bylaws and Range rules of the OSC.  Yes  No

6. I acknowledge that I am encouraged to attend all monthly meetings that are scheduled for each month. The annual meeting and elections are held in November.  Yes  No

7. I certify that the statements made by me are true and accurate. If any of these statements made by me are willfully false, I may be subject to punitive actions as decided by the OSC Board of Directors.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Member Pin Number: \_\_\_\_\_ Amount Paid: \_\_\_\_\_ Start Date: \_\_\_\_\_ Exp. Date: **January 15,** \_\_\_\_\_