



Lone Pine Hunter's Club, Inc. - Hollis NH

Please print information clearly. Please fill in all of the White fields as this information is important to the club.

2023 MEMBERSHIP APPLICATION

Non-Vested Member

or

Family Member **

APPLICANT INFORMATION

First Name:		Last Name:		Application Date:	
Date of Birth:		Cell Phone:		Home Phone:	
Email Address:					
Current Residence Address:					
City:		State:		ZIP Code:	
Height:	Weight:	Hair Color:		Eye Color:	
Place of Employment:			Address:		
Military Status (Active, Inactive, or None):			Years of Service:		Type of Discharge:
Valid CC Permit:	Town of issuance:	Expiration Date:	Member of NRA:	Membership #	
YES / NO			YES / NO		

EMERGENCY CONTACT

Name:		
Address:		Phone:
City:	State:	ZIP Code:
Relationship:		

INDEMNITY AGREEMENT

I (Your Name) _____ of (Town) _____ in consideration of the Lone Pine Hunters Club Inc., furnishing equipment, shooting and hunting instructions without charge, hereby agree to all indemnity and save harmless the personal injuries which may occur during the course of said of which may result from claimed defective equipment, or which nothing herein contained is intended to limit a person's right of action, if an, against third person parties.

SIGNATURES

I certify I have never been convicted of a felony. I certify that the entries listed above are true, complete and correct to the best of my knowledge and are in good faith. I also understand that a knowing and willful false statement on this form may result in dismissal of my club membership.

Applicant Signature:		Date:
Sponsor Name:	Sponsor Signature:	Date:

FOR FINANCIAL SECRETARY ONLY (DO NOT FILL THIS SECTION OUT)

Witnessed By:		Signature:	
App Submission Date:	Date of 1 st Reading & (Initials)	Date of 2 nd Reading & (Initials)	Date Voted In: