

The York & Adams County **GAME AND FISH ASSOCIATION**

P.O. Box 20, Abbottstown, PA 17301

APPLICATION FOR MEMBERSHIP

Date _____

I hereby apply for membership in your Association and certify that I agree to the following membership requirements that: I am a citizen of the USA 16 years of age or older (minors must have parents or guardians signature), I am not a fugitive from the law or in violation of Game Laws, I can understand, speak and read the English language and I have been recommended by two other existing members and sponsored by one. If elected I hereby promise to obey and help to enforce all Pennsylvania Game and Fish Laws and Assoc. By-Laws.

**PROOF OF IDENTIFICATION IS REQUIRED WHEN APPLYING!
MEMBERSHIP CARDS ARE TO BE AVAILABLE ON REQUEST!**

PLEASE PRINT

Name _____

Address _____

City _____ State _____

Zip Code _____ Phone # _____

Drivers Lic.# _____ Soc. Sec.# _____

Age _____ Home Phone No. _____

Occupation _____

Employers Name _____

Optional Criminal Background Check: Yes No

Have you taken a Hunter Safety or NRA Education Course?

Yes No

Sponsored by _____

Recommended by _____

Recommended by _____

The fee of \$ _____ accompanies this application

Date Elected to Membership _____

Mark Interest In Club

- Rifle
- Fish Pond
- Work Details
- Trap & Skeet
- Archery
- Ticket Sales
- Pistol

Date _____

Received from _____

on application for membership into club.

\$ _____