



POYNETTE BOWHUNTERS ASSOCIATION, LTD

2026 **INDIVIDUAL** Membership Application

All memberships run from January 1, through December 31.
Bowhunter's Membership fee includes a Wisconsin Bowhunters Membership fee
(\$25 – individual)
(PBA is a 101% WBH member)

Renewal(s) _____ New Member(s) _____

New & Renewing Members: (8) eight volunteer workhours required

NOTE: 60 volunteer hours = **FREE** membership the following year (membership form still required)

Name: _____ **Phone:** _____ **Email:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Under 18yrs? D.O.B: _____ **Associated Member:** _____

Additional Family Members (please provide emails for those over 18 for newsletter, announcements & voting. and D.O.B for those under 16yrs):

Name: _____ Email: _____ D.O.B: _____

Name: _____ Email: _____ D.O.B: _____

Name: _____ Email: _____ D.O.B: _____

QTY	ITEM	COST	TOTAL
	Associate Single Membership (16+) (non-working)	\$200	\$
	Single Membership (16+yrs, 8hrs work requirement)	\$100	\$
	Senior Membership: 65 & over (no work hours required)	\$80	\$
	Youth membership age 12 through 15 years (no work hours required) (guardian must be a member)	\$30	\$
	Replacement proximity card (keyfob)	\$25	\$
	New proximity card deposit (keyfob)	\$10	\$
	Volunteer work hours less than 4/8 worked in your last membership year	\$15	\$
	Credit card/PayPal fee	\$5	\$
	Any additional contribution is greatly appreciated. THANK YOU!		\$
	TOTAL DUE		\$
	(Payment can be made in Cash, Credit/Debit card, or Check. Payable to "PBA")		

☐ **Check here if you are a bowhunter.**

☐ **Check here if you are a WBH Life Member.**

☐ All club members are expected to uphold club rules, participate in club functions, complete the required volunteer workhours and participate in committees as outlined in our by-laws, guidelines and DIT's.

☐ I am fully aware of the risks associated with participating in the sport of archery, and in waiving all claims, I acknowledge and understand these risks, and willingly assume all risks associated with my participation.

**You must be present at the PBA Clubhouse to activate
your key fob and to have your renewal or new membership confirmed:**

Signature

Date

Parent / Guardian Signature

FOR OFFICE USE ONLY:

Method of Payment: ☐ Check # _____ ☐ PayPal ☐ Credit Card ☐ Cash

Total Amount Paid: _____

Received by: _____

☐ Member Entry ☐ Email ☐ Worklog ☐ Skynet

Name: _____ **keyfob #:** _____

Name: _____ **keyfob #:** _____

Name: _____ **keyfob #:** _____