HOLLISTON SPORTSMEN'S ASSOCIATION, INC. 137 Bullard Street Holliston, MA 01746 - 6044

www.hsanews.com

P.O. Box 6044 (508) 429-5407

## **APPLICATION FOR MEMBERSHIP**

Name:	Birth	n Month:	Birth Year:
Address:			
Town:	Zip:	Phone:_	
E-mail (Please Print):			
E-mail (Confirm):			
Have you ever been a member of the Ho	olliston Sportsmen's A	ssociation?	
Reason for Applying:			
Are you a member of the National Rifle As	ssn.? #	Gun Owners Act	iion League? #
Do you have an F.I.D. Card?Licens	se to Carry?N	lassachusetts Fish	ing or Hunting License?
If you are not qualified for any of the abo	ve, please explain:		
Please list other organization Affiliations:			
Sporting Interests: ☐ Hunting ☐ Fishing ☐ ☐ Small Bore Pisto List Others:	ol □Center Fire Pist	tol □.22 Rim Fire F	Pistol □Competition
Do you plan to be an active member?			
Please indicate an H.S.A. Committee you	would be willing to he	elpwith:	
$\square$ Audit $\square$ Building $\square$ Clambake/			
$\square$ Grounds $\square$ GOAL $\square$ Hunting $\square$	$\sqsupset$ Indoor Range $\sqcap$ Ju	nior Conservation	Camp □ Junior Rifle
$\square$ Kitchen $\square$ Legislative $\square$ Middl	esex League 🗆 NRA [	☐ Trap ☐ Trout D	erby
Would you be willing to apply your occupa	ation, background, or	experience to ben	efit the H.S.A?
If yes, please list:			
Other ideas to benefit the Association?			

(Continued on other side)

## I, the undersigned, hereby agree:

To uphold the Bylaws of the Holliston Sportsmen's Association;

To promote the interest of legitimate sport with gun, rod, orbow;

To encourage and assist with the conservation of our naturalresources;

To respect the rights of land owners and fellow sportsmen;

To practice good sportsmanship;

To adhere to the laws for the protection and propagation of wildlife;

To adhere to Federal, Commonwealth of Mass., and local laws while on Holliston Sportsmen's Association grounds;

Junior Members (under the age of 21) agree:

To not bring any guests to the Holliston Sportsmen's Association other than parents or legal guardian until attaining the age of 21 years.

I further agree to the terms of the following **RELEASE AGREEMENT:** 

In consideration of, and as part payment for membership in the Holliston Sportsmen's Association I have and do hereby release the Holliston Sportsmen's Association, it's officers, directors, agents, and members from all liability, actions, debts, claims and demands of every kind or nature whatsoever which I now have or which may arise out of or in connection with my participation in or observation of any activities of the Holliston Sportsmen's Association or my use of the facilities of the Holliston Sportsmen's Association, including any liability arising out of the negligence of the Holliston Sportsmen's Association, Inc., its officers, directors, agents, or members. The terms hereof shall serve as a release of liability for me, my heirs, executors and administrators and for all members of my family.

I have read and understand the content and purpose of the terms and conditions of membership set forth above. In signing this agreement I do so voluntarily and without reservation.

Applicant Signature:			Date:		
Sponsored by: (not	required)				
Sponsor Signature:_			Date:		
	APPLICAT	ION PROCEDURE			
completed application by the Board that nigh applicant will be notifi meeting on the first W	for before the Board of Directors on to form plus application fees. The Boa to and subsequently by the general med by mail (or e-mail) of the decision deduced ay of the month to receive a seet with a member of the safety con	rd will interview the Applica nembership (the Applicant d n made. If accepted, the app membership card, and badg	nt. The application must be approved oes not attend this meeting). The licant attends the next monthly ge. To receive a clubhouse key, new		
For H.S.A. use only:	☐ Recommended by B.O.D.	□NOT Recommended I	by B.O.D.		
	□Accepted	☐ NOT Accepted	Date:		

Revised: 07/2022