Lancaster County Sportsmen's Association
Application for New Membership

Applicants must be 21 years of age or older.

Date: _____ Application Fee: $35 Please print legibly.

Full Name: _____ Phone: _____

Street Address: _____

City: _____ State: _____ ZIP Code: _____

Email Address: _____

Age: _____ Date of Birth: _____ State ID/Driver's License No.: _____

Place of Employment: _____

Interests: ☐ Fishing ☐ Small Game ☐ Large Game ☐ Target Shooting ☐ Trap Shooting ☐ Skeet Shooting ☐ Live Music ☐ Line Dancing ☐ Dancing ☐ Social Events ☐ Other _____

Volunteer: ☐ Kitchen ☐ Cleanup Day ☐ Special Events ☐ Raffle Ticket Sales ☐ Event Set-Up or Clean-Up ☐ Administrative ☐ Other _____

What do you have to offer the club?

_____

Why do you want to become a member of Lancaster County Sportsmen's Association?

_____

Sponsor Information

Sponsor	Co-Sponsor
Signature: _____	Signature: _____
Print Name: _____	Print Name: _____
Member No.: _____	Member No.: _____

Do you have an arrest record? ☐ Yes ☐ No *Does not necessarily disqualify you from membership

If yes, please describe: _____

Are you a member of, or affiliated with, the Pennsylvania Liquor Control Board? ☐ Yes ☐ No

Applicant Acknowledgment

☐ I have read and agree to all club rules and regulations.

☐ I consent to a background check as part of the membership application process.

Any false information may result in permanent suspension of membership, loss of property privileges, and a fine of up to $100.00. Any disturbance caused by a member may also result in permanent suspension.

Applicant Signature: _____

Your membership card will be held at the door for pickup after Board approval.

Cards are usually available on the 2nd Tuesday of the month after application.

Completed application and payment received by _____

For LCSA Membership Secretary Use Only

Status: ☐ Approved ☐ Rejected **Member No.:** _____

Payment Received: Cash _____ Check No.: _____