



Tacoma Sportsmen's Club, Inc.

16409 Canyon Rd E

Puyallup, WA 98375

(253) 537-6151

TSC1933@outlook.com www.tacomassportsmensclub.com

MEMBERSHIP APPLICATION

PLEASE PRINT CLEARLY

Mbr # _____

Name: _____

First

MI

Last

Nickname

Street Address: _____

City: _____ State: _____ Zip: _____

Mailing Address: (If different than above) _____

Home Phone: (____) _____ Work Phone: (____) _____

Cell Phone: (____) _____ Sex: Male _____ Female _____ **Birthdate:** ____/____/____

Employer: _____ Occupation: _____

Email: _____ Photo ID #: _____

NRA Member ID # _____ WSAA Exp. _____

Spouse/Significant other name: _____ **Birthdate:** ____/____/____

Spouse/Significant other Email: _____ Cell Phone: (____) _____

*Child: Name _____ Birthdate: ____/____/____

*Child: Name _____ Birthdate: ____/____/____

*Child: Name _____ Birthdate: ____/____/____

(If you need additional room to list children please use the back)

***Covers children up to the age of 18 or 21 if still in school**

Active participation is requested of each member. Please remember, for the most part, we are a volunteer organization.

I pledge myself as a responsible human, to assume my share of man's stewardship of our natural resources. I will respect the rights of others and abide by the law. I will support the sound management of the resources we use, the restoration of the resources we have despoiled, and the safekeeping of significant resources for posterity. I will never forget that love and beauty, wealth and progress depend on how wisely man uses these gifts....the soil, water, air, minerals, the plant life and wildlife. This I pledge!

I, _____ do hereby make an application for membership in the Tacoma Sportsmen's Club, Inc. I certify that I am an adult and citizen of good repute of the United States, that if admitted to membership, I will fulfill the obligations of good sportsmanship and citizenship, and that I agree to abide by the bylaws, rules and regulations of the Tacoma Sportsmen's Club, Inc.

_____/_____/____

Signature

Date

OVER

List additional Child/children: name and birthdate

If you are interested in volunteering please list your preference (s).

How did you hear about us?

**when volunteering 20+ hours you receive \$150 discount on
your annual renew*

Active participation is requested of each member. Please remember, for the most part, we are a volunteer organization.

Applications are approved at the Board of Directors meeting once a month. We will send an invitation to attend the General Membership meeting. In the event that you cannot attend, your permanent badge(s) will then be mailed to you. We'll be sending you our monthly email newsletter, including the latest news about our events and new products.

At no time will your personnel information be given out or used for anything other than contacting you. In the event you wish not to join and a refund is requested, you have 14 days from the date signed to do so.

OFFICE USE ONLY

- ☐ Initiation Fee: \$75.00
☐ Annual Dues: \$200.00
☐ Associates Membership \$50

Proposed by: _____

Member number: _____

Co-signed by: _____

Date approved: ____/____/____

TOTAL FEES SUBMITTED: _____ Received by: _____

- ☐ Cash
☐ Check #
☐ Credit Card

Receipt# _____

Credit Card number: _____

Billing Zip Code: _____

Exp. date: ____/____/____ CVC: ____ (3 digits on back)

Print the application and mail in with payment information filled out or with a check, or email the application and/or call for payment over the phone. You may also bring the application into the office.

☐ Constant contact

☐ Dues card

☐ Membership card(s)

☐ Volunteer list

☐ Invite letter

☐ Add to new member list

☐ Welcome letter