



## OFFICIAL MEMBERSHIP FORM

PLEASE PRINT CLEARLY & PRESS FIRMLY—CHECK ALL COPIES

Membership No. \_\_\_\_\_ (if applicable)

\*Name \_\_\_\_\_

\*Address \_\_\_\_\_

\*City \_\_\_\_\_ \*State \_\_\_\_\_ \*Zip \_\_\_\_\_

\*Country \_\_\_\_\_ \*Province \_\_\_\_\_

\*Phone # (\_\_\_\_) \_\_\_\_\_ \*Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Email: \_\_\_\_\_

\* Asterisk denotes required field.

\$60.00 ADULT - Membership Fee

\$10.00 JUNIOR - Membership Fee (One time fee until 16 years of age)

Cash \$ \_\_\_\_\_ Check # \_\_\_\_\_ Credit Card \_\_\_\_\_

Applicant  
Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Parent/Guardian  
Signature (if applicable) \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Witnessing  
Agent \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

All fees non-refundable

**Southtowns Walleye Association of WNY, Inc.**  
5895 Southwestern Boulevard, Hamburg, NY 14075

White Copy – Office Staff, Blue – Member