



CENTRALVILLE SPORTSMEN'S CLUB, Inc.

308 Wheeler Road - Dracut, Massachusetts 01826-0597

978-452-8095 - www.cscdracut.org

Membership Application

Last Name: _____ First Name: _____
 Street: _____ City / Town: _____
 State: _____ Zip Code: _____ Phone: _____
 Date of Birth: _____ Email (Required): _____
 Occupation: _____ Place of Employment: _____

United States Citizen (Y/N)? _____
 Do you presently hold a valid F.I.D. Card / LTC (Y/N)? _____
 F.I.D. / LTC License Number: _____ Expiration Date: _____
 Have you ever been convicted of a felony in any state (Y/N)? _____
 Have you been denied membership in or had your membership revoked from another club (Y/N)? _____
 Is a member of your immediate family a member of his club (Y/N)? _____ Relationship: _____
 For what reasons do you want to join this club?

Clubs or organizations with which you are affiliated:

Which activities are you interested in? ___ Target Shooting ___ Trap Shooting ___ Fishing ___ Archery
 Do you agree to abide by the bylaws and rules of this club (Y/N)? _____

Applicant's Signature: _____ Date: _____

Sponsor Information

(A sponsor must be a member in good standing for at least one year and is required for all applicants):

Sponsor's Name (Printed): _____
 Sponsor's Signature: _____ Sponsor's Badge #: _____

**All key fobs and badges must be returned to the club upon surrendering of membership.
 Any falsification of statements and information submitted on this application is subject to the refusal of membership.
 Cash, checks, or money orders accepted. Please make checks payable to "Centralville Sportsmen's Club"**

**Please include with your application a copy of your valid F.I.D. card or valid license to carry firearms.
 If you do not possess a valid F.I.D card or a valid license to carry firearms, you must provide a recent CORI report.**

Below Area For Board of Directors Use Only

<input type="checkbox"/> \$110 Initiation Fee <input type="checkbox"/> \$135 Annual Dues <input type="checkbox"/> \$65 Work Assessment (Returned after 4 hours of service) (\$310 Total first year dues) <input type="checkbox"/> CORI provided (If applicable) <input type="checkbox"/> Money Order <input type="checkbox"/> Cash <input type="checkbox"/> Check (check #)	First Reading: ____/____/_____ Date Accepted: ____/____/_____ New Member Badge #: _____
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- Any false or untruthful statement on the application may result in your immediate termination from the club.
- Dues and fees are non-refundable for any reason.
- By submitting this application, you agree to abide by the rules, bylaws, and code of conduct of the Centralville Sportsmen's Club