



CENTRAL WISCONSIN CHAPTER APPLICATION FOR MEMBERSHIP

NAME _____

ADDRESS _____
HOME BUSINESS (circle one)

CITY _____ STATE _____ ZIP _____

HOME PHONE _____ BUSINESS PHONE _____

E-MAIL _____

DATE OF BIRTH _____ U.S. CITIZEN: YES NO

SPOUSES NAME _____

SPONSOR'S NAME _____

AS A MEMBER OF THE CENTRAL WISCONSIN CHAPTER OF SAFARI CLUB INTERNATIONAL
WOULD YOU BE WILLING TO HELP IN ANY OF THE FOLLOWING AREAS?

<input type="checkbox"/> OFFICER OR DIRECTOR	<input type="checkbox"/> PUBLICITY & ADVERTISING
<input type="checkbox"/> CONSERVATION PROJECTS	<input type="checkbox"/> MEMBERSHIP
<input type="checkbox"/> EDUCATION	<input type="checkbox"/> GOVERNMENTAL AFFAIRS
<input type="checkbox"/> HUNTER'S RIGHTS	<input type="checkbox"/> BANQUETS
<input type="checkbox"/> TROPHY RECORDS	<input type="checkbox"/> YOUTH PROGRAMS

NOTE: MEMBERSHIP FEE MUST ACCOMPANY THIS FORM

_____ **1 YEAR:** \$85.00 (\$65 to National / \$20 to the Chapter)

_____ **3 YEAR:** \$225.00 (\$175 to National / \$50 to the Chapter)

_____ **LIFE MEMBER:** \$1750.00 (\$1500 to National / \$250 to the Chapter)

*Note – Must be a National Life member to become a Chapter Life Member

_____ **SABLES:** \$30.00 (1 Year); or \$75.00 (3 Year)

_____ **SABLES:** \$500.00 (Life Membership) (\$250.00 for SCI Life Members)

_____ New _____ Renewal \$ _____ Amt. Encl.

SIGNED _____ DATE _____

SEND COMPLETED FORM WITH PAYMENT:

Kathe Koback
W4230 State Rd 23
Montello WI 53949