

## Lone Pine Hunter's Club, Inc. - Hollis NH Please print information clearly. Please fill in all of the white fields as this information is important to the club.

2023 JUNIOR MEMBERSHIP APPLICATION							
APPLICANT INFORMATION							
First Name:			Last Nam	ne:	Applicat	plication Date:	
Date of Birth:			Cell Phor	ne:	Home Phone:		
Email Address:							
Current Residence Address:							
City:				State:		ZIP Code:	
Height: Weight:				Hair Color:		Eye Color:	
EMERGENCY CONTACT							
Name:							
Address:				Phone:			
City: State				ZIP Code:			
Relationship:							
INDEMNITY AGREEMENT							
I (Your Name)of (Town)take full responsibility for (JR Member Name)of (Town)and will agree to these terms in consideration of the Lone Pine Hunters Club Inc. furnishing equipment, shooting and hunting instructions without charge, herby agree to all indemnity and save harmless the said "Lone Pine Hunters Club Inc.", or any of its instructions, from any claim from all damages including property damage or personal injuries which may occur during the course of said of which may result from claimed defective equipment, or which may occur on the premises where said person is taken for shooting and/or hunting instructions. Nothing contained herein is intended to limit a person's right of action, if any, against third person parties.							
SIGNATURES							
I certify I have never been convicted of a felony. I certify that the entries listed above are true, complete and correct to the best of my knowledge and are in good faith. I also understand that a knowing and willful false statement on this form may result in dismissal of my club membership.							
Applicant Signature:						Date:	
Related Sponsor Name: Re				lated Sponsor Signature: Date:		Date:	
FOR FINANCIAL SECRETARY ONLY (DO NOT FILL THIS SECTION OUT)							
Witnessed By:				Signature:			
App Submission Da	App Submission Date: Date of 1st Reading & (Initials)		Date of 2 <sup>nd</sup> Reading & (Initial	s)	Date Voted In:		

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