WEST KNOX WILD GAME CLUB INC.
2008 MEMBERSHIP APPLICATION

NON-PROFIT ORGANIZATION

WILTON/WOODBINE, KENTUCKY

"WILDLIFE FOR FUTURE GENERATIONS"

NAME: _____

FIRST MIDDLE LAST

ADDRESS: _____

STREET ADDRESS (OR) P.O. BOX

ADDRESS: _____

CITY STATE ZIP CODE

PHONE #:		OCCUPATION:	
AREA CODE/PHONE #:		JOB TITLE:	

EMERGENCY CONTACT: NAME & PHONE # OF: (PERSON TO NOTIFY):

(FULL NAME) (PHONE NUMBER)

(NAME PERSON WHO INTRODUCED YOU TO WEST KNOX CLUB OR SIGNED YOU UP):

NAME OF PERSON'(S): _____

SINGLE PLAN - YES/NO	SPOUSE NAME:			
FAMILY PLAN - YES/NO	CHILD NAME:		AGE	
MUST BE 17 YRS & UNDER TO QUALIFY ON FAMILY PLAN	CHILD NAME:		AGE	
	CHILD NAME:		AGE	

(READ MEMBERSHIP AGREEMENT & SIGN:) I HEREBY CERTIFY, I UNDERSTAND AND WILL ABIDE BY RULES OF THE WEST KNOX GAME CLUB INC., PO BOX 855, WOODBINE, KY 40771, & UNDERSTAND IF I DO ANYTHING TO HARM, OR GIVE CLUB A BAD NAME, GROUNDS FOR DISMISSAL FROM CLUB UNDER GUIDELINES ESTABLISHED. MUST FOLLOW ALL APPLICABLE KENTUCKY STATE & UNITED STATES FEDERAL RULES FOR HUNTING & FISHING, WHILE ON ANY PROPERTY CONTROLLED BY WEST KNOX WILD GAME CLUB. (ABSOLUTELY NO ILLEGAL DRUGS OR ALCOHOL)!

Note: All members are responsible for knowing, or learning W.K.W.G.C. Club Boundaries.

Also, adhere to all Rules & By-Laws of W.K.W.G.C. If you don't know ask, or find out!

CHECK#/CASH:		AMT:		SIGNATURE:			
DATE:	/ / 08	OFFICER NAME:		KEY NUMBER: WK-		CARD DT:	, 2008
CHECK#/CASH:		AMT:		SIGNATURE:			
DATE:	/ / 09	OFFICER NAME:		KEY NUMBER: WK-		CARD DT:	, 2009
CHECK#/CASH:		AMT:		SIGNATURE:			
DATE:	/ / 10	OFFICER NAME:		KEY NUMBER: WK-		CARD DT:	, 2010