



# 2025 Membership Application Crivitz Bowhunter's Club

**This box filled out by CBC**

App Accepted Y / N

Membership Card sent/rec.

Officer Initials: \_\_\_\_\_

Date: \_\_\_\_\_  New Member  Renewal

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Would You Like Reminder Texts or Emails Before 3-D Shoot?  Yes  Text or  Email  No

Would You Be Interested In Helping Out Before, During, Or After Our 3-D Shoots?  Yes  No

Would You Be Interested In Helping Maintain The Range's Grounds (Cut Grass . . .)?  Yes  No

### Additional Family Members

Please State Name, Age & **Date Of Birth If Under 18 Years Of Age.**

Name:	Age	Date Of Birth
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

### Crivitz Bowhunter's Club Membership:

- \$15.00 Single Membership Crivitz Bowhunter's Club Membership
- \$20.00 Family Membership Crivitz Bowhunter's Club Membership
- FREE 65 Years Of Age Or Older FREE Crivitz Bowhunter's Club Membership

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Enclosed Is My Remittance of \$ \_\_\_\_\_ To Join Crivitz Bowhunter's Club

Cash: \_\_\_ Check #: \_\_\_\_\_ Credit Card:  MasterCard  Visa  American Express  Discover

\*Credit Card #: \_\_\_\_\_ Name On Card: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ CVV: \_\_\_\_\_ (3 Digit # On Back Of Your Card) Zip Code: \_\_\_\_\_

**Applicant Signature:** \_\_\_\_\_

**Mail To CBC Treasurer: Lynn Brady \* N7632 Sandstone Lane \* Crivitz, WI 54114**

**\*Please Note: There is a \$1.00 processing fee for Credit/Debit card transactions**