CENTRAL OHIO CHAPTER SAFARI CLUB INTERNATIONAL
MEMBERSHIP APPLICATION FORM

Dear Fellow Hunter: Please answer the questions below. They are designed to give us a picture of your interest and participation in hunting. The membership committee will review your application on these points, and will advise you as to its decision promptly. This application is subject to the Board approval.

Last Name_____ First Name_____ Middle Initial_____

Address_____ City_____ State_____ Zip_____

Employer_____ Profession_____

Address_____ City_____ State_____ Zip_____

Residence Phone ( )_____ Business Phone ( )_____

Fax ( )_____ e-Mail _____

Where would you rather receive SCI mail? (Circle One) Home Address Business Address

Do you have children interested in the hunting and conservation programs of SCI? _____

Please list the names of sporting, hunting, wildlife conservation, professional or other clubs of which you are a member:

_____
_____
_____
_____

Please circle the Chapter committees in which you would like to participate (Circle one):

Political Action - Membership - Social Activities Planning - Sportsmen Against Hunger

Name of Sponsoring Member_____ Name of Seconding Member_____

I hereby apply for membership:_____

Signature Date

A check made payable to **SAFARI CLUB INTERNATIONAL-CENTRAL OHIO CHAPTER**

$55.00 must accompany this application. Send check and application to the following address or give to any board member.

SAFARI CLUB INTERNATIONAL-CENTRAL OHIO CHAPTER
P.O. Box 175, Dublin, Ohio 43017-0175
Tel: 614-876-9988 Fax: 614-876-9986