

Application for Membership  
**IZAAK WALTON LEAGUE of AMERICA**  
York Chapter 67 – York Pa.

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

TELEPHONE: (     ) \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

EMAIL ADDRESS: (for newsletter distribution) \_\_\_\_\_

EDUCATION: \_\_\_\_\_

EMPLOYER(S) NAME major duties/title/dates \_\_\_\_\_

SPOUSE'S NAME (if spousal membership) \_\_\_\_\_

EDUCATION: \_\_\_\_\_

EMPLOYER(S) NAME: \_\_\_\_\_

Have you ever been convicted of a crime?            Yes   No            Spouse?    Yes   No

Organizations (clubs, fraternal, business, church, military) List offices held by you or your spouse

\_\_\_\_\_

Reason for Joining

\_\_\_\_\_

**Note: all applicants must attend an orientation and an open meeting to submit application, with fees.**

Please indicate areas of interest:

Buildings and grounds	Public relations	Conservation	Pheasant
Membership	Firearms education	Trap	Memorial
Junior Chapter	Special Events	Rifle	Refreshments
Fish Distribution	Entertainment	Pistol	Bulletin/Newsletter
Trout nursery	Scholarship	Archery	Fund raising

Sponsor Signature: \_\_\_\_\_ Sponsor Signature \_\_\_\_\_

Your Signature \_\_\_\_\_ Orientation signature \_\_\_\_\_

Spouse Signature \_\_\_\_\_ Orientation Signature \_\_\_\_\_

Sponsors must be members with a minimum of 2 years good standing.

Your signature(s) gives York Chapter 67 IWLA permission to conduct a background investigation.

Dues and Initiation Fees \$ \_\_\_\_\_ Date Approved \_\_\_\_\_

This area for club use