



CASCADE FIELD AND STREAM CLUB

MEMBERSHIP APPLICATION

SIGN UP FOR: Annual Membership \$80 Family Membership * \$120 New Renewal
Membership # _____ Full Life Membership \$1000 Senior Life Membership \$500
Disabled Life Membership \$500 (**Life memberships - call for availability**)
Total _____ Payable to CF&S Club

Method of Payment Cash Check \$200 Cash & Monthly Payments (Life)

NRA Membership Number _____ or NRA Application and \$40 Check payable to NRA

(Please Print)

Name _____ * Spouse/Domestic Partner name _____

Address _____

City _____ State _____ Zip Code _____

Occupation/Trade _____ Birth Date _____

Phone _____ Email Address _____

Declaration:

I certify that I am not a member of any organization or group which has as any of its program the intent or advocating of any attempt to overthrow the Government of the United States or any of its political subdivisions by force or violence. That I have never been convicted of a crime that would by law restrict my right of ownership of a firearm. That if I am admitted to membership I will abide by the rules and regulations of the Cascade Field & Stream Club".

Signature _____ Date _____

Mail to:

CF&S, PO Box 424, Cle Elum, Wa. 98922