

Of	ficial	use	onlu

Application Date: ______ Full Membership Date: ______

Approved: _____

Membership Application

Name: First	Middle Initial Last
Permanent/Mailing Address:	
Occupation	
Type of Membership Desired: Active	, Family,, Social
If Family Membership please list other far	mily members:
Name:	Age
Name:	Age
Please indicate how you learned about the	BKB:
Other Archery or Sporting Clubs you have	e been or are now a member of:
Have you had Archery instructions?	Have you taken a Hunters Safety Course?
Main Interest: Field / 3-D / Target Arche	ry Hunting Both Number of game taken with the Bow:
I certify that I will:	
 promoting good sportsmanship i Conduct myself in a safe manner Archery. Assist in the instruction of novice sportsmanship. 	y-Laws of the "Black Knight Bowbenders" and that I will take active part in in the sport of archery. r, so as to cast no discredit to the "Black Knight Bowbenders" or the sport of e archers when called upon to do so, especially in areas of safety and equesting and obtaining permission to hint on their property.
Sponsor:	
Applicant Signature:	
Initiation Fee of \$ 100 plus tax paid on:	Land Assessment Fee of \$ 100 paid on:
Note: Annual Dues of \$ 120 plus tax, are	due after the 6-month probationary period. Please note that in accordance

with the Constitution and by-laws of the BKB that Initiation Fees are Non-Refundable. Application Fee does not include NFAA or SFAA fees.