



Alton-Wood River Sportsmen's Club

Associate Membership Application



PLEASE **PRINT** ALL INFORMATION **CLEARLY**

TODAY'S DATE: _____

MEMBER'S NAME: _____, _____, _____ BIRTHDATE: ____/____/____
(Last) (First) (MI) (MM) (DD) (YY)

SPOUSE NAME: _____, _____, _____ BIRTHDATE: ____/____/____
(Optional) (Last) (First) (MI) (MM) (DD) (YY)

ADDRESS: _____, _____, _____, _____, _____, _____
(Number & Street/P.O. Box) (City) (State) (Zip)

PHONE: () _____ - _____ [] Cell [] Home [] Work

EMAIL: _____ Employment _____
)

COMMITTEE WORK INTERESTS: [] Bingo [] Trap [] Lake [] Grounds [] Entertainment
[] Growth [] Decorations [] Special Events [] Other: _____ (please specify)

SPONSORING MEMBER: _____
(Please Print Name Legibly) _____ (Signature) _____

APPLICANT'S SIGNATURE: _____

SPECIAL NOTE: MEMBERSHIP DUES MUST BE SUBMITTED WITH APPLICATION

BOARD APPROVAL: ____/____/____ MEMBER # _____ PAID: CHECK # _____ [] CASH [] CC [] ACH (voided check required)

AUTHORIZATION AGREEMENT FOR DIRECT DEBITS (ACH DEBITS)

Check: [] Associate Dues [] Regular Dues [] Waterfowl Dues [] Trailer Pad Fees [] Pleasant Hill Use

I hereby authorize the Alton Wood River Sportsmen's Club, Inc., hereinafter called **AWRSC**, to initiate debit entries to my (our) [] **Checking Account** or [] **Savings Account** (check one) at the depository financial institution indicated below, hereafter called **DEPOSITORY**, and to debit the same to such account. I acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U. S. Law.

Routing Number _____
(9 digits)

Account Number _____

This authorization is to remain in full force and effect until the **AWRSC** has received written notification from me (or either of us) of its termination in such time as in such manner as to afford **COMPANY** and **DEPOSITORY** a reasonable opportunity to act on it.

Name(s) _____ Phone # (____) ____ - ____
(Please Print)

Date ____/____/____ Signature(s) _____

NOTE: WRITTEN DEBIT AUTHORIZATIONS **MUST** PROVIDE THAT THE RECEIVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORIGINATOR IN THE MANNER SPECIFIED IN AUTHORIZATION.

Please attach a **VOIDED** check or deposit slip with the following information on it:
Name, Routing Number, & Account Number