



SPRINGFIELD, IL 62708

www.springfieldcrappieclub.com

SPRINGFIELD CRAPPIE CLUB APPLICATION FOR MEMBERSHIP

Application Date (required): _____

Name: _____ Partner's Name: _____

Address: _____ Address: _____

City & Zip: _____ City & Zip: _____

Phone: _____ Phone: _____

Email: _____ Email: _____

Signature: _____ Signature: _____

New Membership Fees: \$15.00 each new member (due with application)

Renewal Membership Fees: \$25.00 per member

In signing this application, I hereby waive and release all Springfield Crappie Club members, Springfield Crappie Club officers, and sponsors from all claims of injury or damage incurred with any or all Springfield Crappie Club functions and Springfield Crappie Club Tournaments.

Please mail completed application along with a check for full (two - person) team membership (\$50.00) to:
Springfield Crappie Club
P.O. Box 2574
Springfield, Il. 62708

Upon acceptance of membership, a copy of this application will be returned to each new team member with your assigned boat number. Please remember this number, as it will serve as your team identification number for all club functions.

|| For office use only

|| Date: _____ Assigned Boat # _____

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