

Heart of Maryland Bowhunters, Inc.

Membership Application

Name: _____ Date: _____

Address: _____

Phone#: _____ Email: _____

Heart of Maryland Bowhunters, Inc. is committed to safe, ethical bowhunting and the preservation of our sport for the future generations. We are looking for members to support these goals.

Please tell us about yourself:

- Age _____ How long have you been shooting a bow _____
- Preferred choice of bow: Compound _____ Recurve _____ Longbow _____
- Have you ever taken a hunter safety course? Regular _____ Bowhunting _____
- Primary shooting interest: 3D _____ Target butt practice _____ Both _____
- Have you ever been convicted of a game violation? Y N If yes (Y), please explain

- What other sportsman or shooting clubs do you belong to?

If accepted, I agree to uphold the constitution and by-laws of the Heart of Maryland Bowhunters, Inc.

Check one: First time member _____ Regular member renewal _____

Print name: _____

Signature: _____ Date: _____

Membership dues is \$ _____ for first time initiation fee, and \$ _____ annual membership dues.

Total due:

Date Of Approval: _____

Check: _____ Cash: _____