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NORTH FLORIDA CHAPTER

**APPLICATION FOR MEMBERSHIP**

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NAME E-MAIL ADDRESS

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

HOME ADDRESS CITY/ STATE/ ZIP HOME PHONE

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

BUSINESS ADDRESS/COMPANY NAME CITY/ STATE/ ZIP BUSINESS PHONE

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

SPOUSE’S NAME APPLICANTS OCCUPATION FAX #

**Mail to be sent to: □ Home Address □ Business Address**

SCI is the leader in protecting the freedom to hunt and promoting wildlife conservation worldwide.

**We do this through a regular newsletter, monthly meetings with programs of interest, conservation and hunter**

**education programs, public programs, family skeet shoots and an annual fundraiser. We are successful in these**

**endeavors because we are an active club with active members.**

**Please indicate two or more areas in which you**

**would like to participate.**

**COMMITTEE ASSIGNMENTS**

**□ Sportsmen Against Hunger □ Sensory Safari**

**□ Shooting Sports/Events □ Membership & Monthly Meetings**

**□ Annual Fundraiser □ Newsletter**

**□ YO Ranch/AWLS**

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**ARE YOU CURRENTLY A MEMBER OF ANY OF THE FOLLOWING:**

**□ National Wild Turkey Federation □ Ducks Unlimited**

**□ Quality Deer Management □ Florida Wildlife Federation**

**□ Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **□ NRA**

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**CHOOSE YOUR MEMBERSHIP LEVEL BELOW**

**NATIONAL LEVEL: CHAPTER LEVEL: TOTAL**

**One (1) year Member: $65.00 One (1) year member: $60.00 $125.00**

**Three (3) year: $150.00 One (1) year $60.00 $210.00**

**Life Member: $1500.00 Life member $700.00 $2200.00**

**Senior Life Member $1250.00 Senior Life Member 60 & over $600.00**

**Enclosed is my check in the amount of $\_\_\_\_\_\_\_ made payable to SCI. I understand this amount includes**

**my annual membership fees to the international organization and subscription to *Safari Magazine* and**

***Safari Times.***

**I HEREBY APPLY FOR MEMBERSHIP.**

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**Applicant Signature** **Member/Sponsor**

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**Date** **Member/Sponsor**

**MAIL TO:**

**North Florida Chapter SCI**

**11225 OLD KINGS ROAD**

**JACKSONVILLE FL 32219**