

**Leatherstocking Club of Oswego County -
Membership Application Form -**

First Name: _____ Last Name: _____ DoB: ___/___/___
 Email: _____ Phone:(____) ____ - _____

Address: _____ City: _____
 State: _____ Zip: _____

Emergency Contact -
 Name: _____ Phone:(____) ____ - _____

Membership Type (Check One) -

Type:	Description:	Fee:
<input type="checkbox"/> Regular	Single Member age 16-59	\$50
<input type="checkbox"/> Senior	Single Member age 60+	\$25
<input type="checkbox"/> Junior	Single Member age 12-16	\$15
<input type="checkbox"/> Couple	Member + Significant Other	\$65
<input type="checkbox"/> Family	Member + Significant Other + Children (Maximum: 3) ages 12-16	\$120
<input type="checkbox"/> Senior Family	Member + Significant Other + Children (Maximum: 3) ages 12-16	\$70

Add any additional members' (Significant Other/Children/Grandchildren) information below.

Additional Member Full Name	Age

MEMBERSHIPS EXPIRE DEC. 31ST EACH YEAR. RENEWALS BEGIN ONE MONTH PRIOR.

Make checks payable to: "LEATHERSTOCKING CLUB"

Check or money order ONLY! DO NOT SEND CASH!

Your Membership card and gate combination will be mailed to the above address.

To submit your application, mail this completed form with your payment and a **STAMPED, SELF-ADDRESSED ENVELOPE** to:

Roy Abbott - 31 Old State Rd., Fulton, NY 13069