



SAFARI CLUB INTERNATIONAL

DETROIT CHAPTER

APPLICATION FOR MEMBERSHIP

Name: _____ Spouse's name: _____

Date of birth: _____ Citizen of: _____

Home address: _____ City: _____

State/Prov.: _____ Zip: _____ Home Telephone Number: _____

Business address: _____ City: _____

State/Prov.: _____ Zip: _____ Business Telephone Number: _____

Email Address: _____ Are you currently a member of SCI: YES (Membership Number) _____ NO

Where should Club notices and mailings be sent? Home Address Business Address

Present Business or Profession: _____

List the clubs and associations connected with the field of hunting in which you hold membership. Please include any board positions, if any: _____

Are you a member of the NRA? Yes (Membership Number) _____ No

Please indicate the committees in which you would be interested in providing assistance:

- | | | |
|--------------------------------------|---|--|
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Special Event | <input type="checkbox"/> Membership Programs |
| <input type="checkbox"/> Banquets | <input type="checkbox"/> Chapter Publications | <input type="checkbox"/> Humanitarian |
| <input type="checkbox"/> Education | <input type="checkbox"/> Legislative | <input type="checkbox"/> Conservation |
| <input type="checkbox"/> Website | <input type="checkbox"/> Awards/Record Book | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Sables | | |

Membership Type:

1 Year \$100.00	3 Year \$265.00
International Life \$1000.00	Detroit Life* \$750.00
1 Yr. Multi-Chapter* \$25.00	Detroit Youth* \$15.00

*Must be an International Life Member

SPONSOR 1: _____

SPONSOR 2: _____

I am an ethical hunter and hereby submit my name for membership.

Please enroll me as an International & Detroit Chapter Member at the amount selected on the left. Payment is \$ _____ or charge to my: (circle one)

MasterCard Visa American Express

Account Number: _____ Expires: _____

Signature: _____

Date: _____

**Send check payable to SCI-Detroit
SCI-Detroit Chapter, P.O. Box 182102, Shelby Twp. MI 48318
For additional information, please call (586) 770-6712**