WINNIPESAUKEE SPORTSMEN'S CLUB MEMBERSHIP RENEWAL 2024

Please complete this form and return it to WSC, 616 Governor Wentworth Highway, P.O. Box 192, Moultonborough NH 03254, with a check for \$70.00, \$25.00 IF YOU ARE A WOUNDED VETERAN

PLEASE PRINT

NAME	MAILING ADDRESS	
EMAIL ADDRESS		AMOUNT SENT
PHONE # H	C	SUMMER PHONE #
Range Rules, Liability that my failure to abide	Waiver, Pledg by them may phibited from b	y dues payment certifies that I have read and understand the WSC e and Code of Ethics and agree to abide by them understanding result in my expulsion from the club. By signing these forms, I having or obtaining a concealed carry handgun license in the State
MEMBER PLEDGE A	ND CODE OI	F ETHICS:
group which has any part of its force or violence; that I am not	agenda the attempt prohibited under F	itizen of the United States of America and that I am not a member of any organization of to overthrow the government of the United States or any of it's political subdivisions, rederal or State Law from possessing, using or being in the close proximity to firearms of good sportsmanship and good citizenship.
obey all game laws and regulat	ions and will insist ate responsibility a	dling and will do so courteously, but firmly, insist that others with me do the same. I we that my companions do likewise. I will do my best to acquire those marksmanship and good sportsmanship. I will support efforts to promote firearm safety and responsible ricans.
		BOVE MEMBERSHIP PLEDGE, CODE OF ETHICS AND WSO TERMINATION OF MY MEMBERSHIP.
SIGNED		DATE

Please Note: Your keycard will not work after April 1, 2024 unless you have renewed your membership.

Life Members please update your information, sign, and return.

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