

2024 Membership Application - Student



I understand that my membership allows me full use of the local chapter facilities, rifle/pistol range, organized trap, skeet, sporting clays as well as archery areas. As well as hiking trails and the quarterly national magazine.

We accept credit card, checks and cash
Make checks payable to: **The Izaak Walton League**

Please Print: We reserve the right to refuse any application that isn't completely and legibly filled out.

Date: _____

Name: _____

Address: _____

City, State & Zip: _____

Phone: (____) _____ E-mail: _____

Occupation, Skills and Capabilities that may be of interest to your fellow IWLA members.

____ 2024 - Student Membership: ~~\$62.00~~ Expires December 31, 2024. Must be either HS Student or active College Student and have School ID along with copy of Driver's License or Date of Birth.

Questions:

Are you a member of the NRA: Yes _____ No _____

Do you possess a Indiana LTCH: Yes _____ No _____ (License To Carry Handgun)

Are you a person prohibited by law from possessing a firearm: Yes _____ No _____

What is your main interest in range usage: Rifle / Pistol _____ Shotgun _____

What is your level of experience handling Firearms:

Rifle/Pistol: N _____ I _____ E _____ Shotgun: N _____ I _____ E _____

Please check appropriate box N=None I=Intermediate E= Extensive

COPY OF INDIANA DRIVER'S LICENSE IS REQUIRED AS WELL AS

SIGNATURE ON THE BACK

Gate Pass & Membership Agreement on reverse side

Howard County Chapter of the Izaak Walton League of America
HCIWLA
2629 S. 200 E
Kokomo, IN 46902
765-453-2800

Gate Pass Agreement:

For and in consideration of the sum of \$5.00, HCIWLA agrees to furnish a gate access card.

The active Gate Card Number _____ has been issued to _____

The above gate card grants access to the pistol, rifle and archery ranges during the published times.

The replacement cost for a lost or stolen card shall be \$5.00

In the event that the above member should loan his or her access card to any unauthorized person, a fine shall be imposed of either \$35.00 or loss of membership for the balance of the current membership year. This violation may also result in a permanent loss of membership as decided by the Board of Directors.

The member shall, at all times comply with the written and posted Range rules, regulations and mission of the HCIWLA. All access to the pistol, rifle and archery ranges will be through the card access gate.

Membership Agreement:

By signing this application, **I understand that all new memberships are probationary for 90 days and must be reviewed and approved by the HCIWLA Board of Directors.** I understand that in such case that my membership application is NOT APPROVED, I will be reimbursed the full amount of my membership fee paid with a check from the HCIWLA Treasurer. This check will be issued with-in five (5) business days of the gate card being received by the HCIWLA office.

I further understand that we as members have the duty and right to question **Any Unsafe Gun Handling Practice or any Range Rule Infraction** observed. You may report it to the onsite Property Manager, any manager of one of the Shooting Sports or any member of the Board of directors. . Disciplinary action for violations is as follows if it occurs within the 90-day probationary period your gate card will be shut off. Reinstatement of access will require appearance at the next scheduled board meeting for a hearing. AND, if access is granted, the new member **MUST** attend a range safety review with one of our RSO's on site before the card will be reactivated. **THIS REVIEW WILL BE BY APPOINTMENT WITH THE RSO.**

Existing members will have a 2-step process: 1st offense results in documented written warning and up to a 2-month gate card suspension, 2nd results in loss of membership. A member of the Executive Board will notify the club member in question and inform them that their membership is being reviewed for possible revocation. The board of directors advises that the member in question attend the very next board meeting and provide an explanation of the incident they are being accused of and make a petition to the board as to why they should be allowed to continue as a member of the HCIWLA.

Board meetings take place on the **FIRST** Thursday of each month @ 7 PM sharp at our HCIWLA Lodge located at: 2629 S. 200 E. Kokomo, IN 46902

I agree to the terms above (**Sign Here**) _____

Note: In the case of a Family Membership, either or both of the applicants may sign