North Platte Walleyes Unlimited
P.O. Box 1363
Casper, WY 82602

Membership Application Form

Just fill out this form, print it out and mail it to the address above

Is this application for a (New Membership____) or a (Renewed Membership____)?
(Please place an "X" in the appropriate blank above)

Is this application for a (Single Membership____) or a (Family Membership____)?
(Please place an "X" in the appropriate blank above)

If Family Membership, please indicate the number of persons in your immediate family_____
(Spouse and children under 18 years of age)

Name: _____
(Include spouse's name if this is for a family membership)

Mailing Address: _____
Street or P.O. Box #

_____
City State Zip Code

Phone # _____ E-mail address: _____

May we publish your name and phone number in a membership directory accessible by other members? (yes_____) or (no_____)
(Please place an "X" in the appropriate blank above)

Note: Annual membership fees are $20.00 for a single membership or for a family membership. A membership year runs from March through February of the following year, however, membership fees can be pro-rated for "new" members (see "New Member Pro-rate Fee Schedule" below). Please include the appropriate fee with this application form. Make checks payable to the club at the address as stated in the letterhead of this document.

New Member Pro-rated Fee Schedule

Type:	March thru May	June thru Aug.	Sept. thru Nov.	Dec. thru Feb.
Single or family	$20.00	$15.00	$10.00	$5.00

Amount Enclosed_____

Applicants Signature: _____
Signature