

**Fill out this "Request for Membership" completely and legibly and mail to:
Milton Grove Sportsmens Club
PO Box 341
Elizabethtown Pa.17022-0341**

**You will be notified when a membership opening is available.
Do not send payment with this application.**

U.S Citizen

DATE OF APPLICATION

NAME

STREET ADDRESS

CITY ZIP CODE

HOME PHONE

CELL PHONE

EMAIL ADDRESS

PLACE OF EMPLOYMENT

REASON FOR DESIRING MEMBERSHIP

DATE OF BIRTH

**IF UNDER 18 GIVE NAME & ADDRESS
OF PARENT OR GUARDIAN**

SIGNATURE