

Please supply the following information and mail the completed form and payment to:

Orange County Federation of Sportsmen's Clubs, Inc.
P.O. Box 784
Monroe, NY 10949

Check one:

- Individual \$20
- Club \$80
- Business \$50

Name, Club or Business Name: _____

Address: _____ City: _____ ST: _____ ZIP: _____

Phone: _____ E-Mail _____

Web Site Address _____

For Clubs:

Meeting Night: _____ Total Membership: _____

Federation Delegate: _____ Address: _____

Town/City: _____ ZIP: _____

Phone #: _____ E-Mail _____

1st Alternate Delegate: _____ Address: _____

Town/City: _____ ZIP: _____

Phone #: _____ E-Mail _____

Club Officers:

President: _____ Address: _____

Town/City: _____ ZIP: _____ Phone #: _____

E-Mail _____

President: _____ Address: _____

Town/City: _____ ZIP: _____ Phone #: _____

E-Mail _____

President: _____ Address: _____

Town/City: _____ ZIP: _____ Phone #: _____

E-Mail _____

Vice-President: _____ Address: _____

Town/City: _____ ZIP: _____ Phone #: _____

E-Mail _____

Secretary: _____ Address: _____

Town/City: _____ ZIP: _____ Phone #: _____

E-Mail _____

Treasurer: _____ Address: _____

Town/City: _____ ZIP: _____ Phone #: _____

E-Mail _____