



**AMHERSTBURG MALDEN ANDERTON
SPORTSMENS ASSOCIATION**
486 Lowes Side Road, Amherstburg, Ontario N9V 2Y8
(519) 736-5706

MEMBERSHIP APPLICATION

Name: _____
(Surname) (Given Names)

Home Address: _____
(Street) (Postal Code)

Town: _____

Phone: _____
(Home) (Business)

Birthday: _____
(Day – Month – Year) (email address)

Marital Status: _____ **Spouse's Name:** _____

Number of Children: _____ **Names:** _____

Names: _____ **Names:** _____

Other Club Affiliations: _____

Reason for Joining: _____

Interests: _____

Sponsor: _____

On acceptance of my application, I agree to abide by the rules and regulations of this organization.

Date Signed: _____ **Signature:** _____
(Day – Month – Year)

Signatures: _____
Member of Committee President / Secretary