LAKE EDINBORO SPORTSMAN LEAGUE

Membership Application

PRINT legibly & complete as instructed or application will be returned.

Print this application, complete all information and mail to Lake Edinboro Sportsman League as listed below.

MISSING INFORMATION IS SUBJECT TO DENIAL OF MEMBERSHIP. Date: First Name: Last Name:	
Mailing Address:	
City: State: Zip:	
Home Phone: () Mobile #: ()	
Email address:	_
LESL emails club activity updates , newsletters, and immediate communications. This is approximately $1-2$ times This is our primary form of communication. Only our annual newsletter and membership gate key card are mailed	
MEMBERSHIP TYPE:	
Family membership includes spouse or significant other, and any children under the age of 18 years old using th	<u>e facilities under</u>
adult supervision such as a parent and/or LESL Coach.	
(CIRCLE ONE OPTION)Adult \$20Five Year Adult \$80Lifetime \$300	
Family \$25 Five Year Family \$100 Junior (through age 16) \$	5
Sponsor \$25 (complete the sponsor information at the bottom of this form)	
Amount Enclosed: \$ □ CHECK # or □ CASH	ł
Mail completed form and a check for amount due made payable to "Lake Edinboro Sportsman League" to: Lake Edinboro Sportsman, P O Box 45, Edinboro, PA 16412	
SPONSORS: <u>Please legibly print information as you wish to see it on our website.</u>	
Check if you do NOT want to be listed on our website as a sponsor.	
Business / Sponsor Name:	
Business / Sponsor Contact #: ()	
Business / Sponsor Website:	