



P.O. Box 55112
Little Rock, AR 72215

info@southwindoutdoors.com

Tel: 501-537-0401
Fax: 501-537-0522

APPLICATION FOR CLUB MEMBERSHIP

Name (print) Home street address
City/St/Zip Since Circle one: own--rent--buying--sharing?
Home phone no. Cell phone no. Email
Your mailing address if different Landlord/Mortgage holder: Address/phone
HOMEOWNERS/RENTERS INSURANCE CO. Policy No. expires / /

EMPLOYER Address
City/St/Zip Phone Type of business
Employed since Position Dept. Supervisor

CHARACTER REFERENCE: (Unrelated, and known for over 5 years). Name Phone no.

ALL OF THE FOLLOWING QUESTIONS MUST BE ANSWERED YES OR NO. (1) Have you been convicted of a felony? (2) Are you a citizen of the U.S.A.? (3) Are you now on probation for any criminal offense? (4) Have you ever been ticketed, or fined for a conservation law violation? (5) Have you filed personal bankruptcy within the last 10 years? (6) Are you a member of any organization which opposes the U. S. Government? (7) Have you ever injured anyone while hunting? (8) Have you ever claimed you were entitled to compensation from anyone, for property damage or injury, resulting from a hunting accident? (9) Have you ever damaged someone's property while hunting? (10) Have you ever sued anyone for personal injury resulting from any cause? (11) Have you ever accepted payment for injuries or disability resulting from any cause? (12) Has any other hunting club ever canceled or refused to renew your membership? (13) Do you have a good credit rating? (14) Can you read and understand both sides of this application without anyone helping you? (15) Do you now or plan to accept compensation as a professional hunting or fishing guide? (16) Do you currently lease land for your own hunting? (17) Have you previously applied for membership in American Wildlife Association, LLC or any club which is affiliated with AWA?

CREDIT: Circle number, if you have: 1. Checking account, 2. Master Card, 3. Visa, 4. Discover, 5. American Express, 6. Retail card, 7. Oil Card

IDENTIFICATION: Drivers license no. State issued by: Expires
Height Weight Hair Eyes Skin Birthdate Marital status
Have you completed a hunter safety training course? What State(s)? Year?

LIST ALL VEHICLES TO BE USED WHILE USING CLUB PROPERTY:

Make Yr Style Color 4x4? License no. State
Make Yr Style Color 4x4? License no. State

What other hunting clubs are you now a member of? Show name & year joined

What other hunting clubs are you a former member of? Show name & year terminated

CIRCLE ANY SPORTSMEN CLUBS YOU ARE A MEMBER OF: NRA, QU, DU, DW, PF, NSTRA, NFTA, TCR&GC, NAVDA, BUCKMASTER, MBC, NAHC, PGC, WF, NWTF, FLR&GC, BASS, BC, 7&10GC, NSA, RG, KWF, LSC, OTHERS

Describe breed, color & number of hunting dogs you will be using:

LIST ALL DEPENDENTS (SPOUSE & DEPENDENT CHILDREN) WHO MAY ACCOMPANY YOU AS YOUR GUEST: DEPENDENT CHILDREN MUST BE UNDER THE AGE OF 25, AND IF NOT LIVING AT HOME, MUST BE A FULL TIME STUDENT, TO QUALIFY:

Table with columns: NAME, SEX, BIRTHDATE, HOW RELATED?, - NAME, SEX, BIRTHDATE, HOW RELATED?

NUMBER OF DAYS EACH YEAR I PLAN TO USE AWA LAND TO HUNT FOR? quail, pheasant, duck, goose, dove, turkey/bow, turkey/gun, deer/bow, deer/gun, grouse, prairie ckn, squirrel, rabbit, coyote, raccoon, prairie dogs, elk, antelope, boar, NUMBER OF DAYS EACH YEAR I PLAN TO FISH ON AWA LAND? I WANT TO USE LAND IN STATES CHECKED: AR, CO, IA, KS, LA, MO, MS, NE, OK, TN, Other States

Club Membership Initiation \$995, Dues: Annual \$1,045, Quarterly \$265, Monthly \$95, Floating Guest \$495 each.
Initiation \$, Dues \$, Guest \$, Initial total \$, Thereafter pay \$ every on
Approval is given to charge \$, as well as, monthly or quarterly dues, guest & misc. fees to:
Credit Card Type Number Expires /

HOW DID YOU HEAR ABOUT US? (Name sponsor if any):

Comments:

MISLEADING OR FALSE INFORMATION GIVEN TO OBTAIN CLUB MEMBERSHIP WILL RESULT IN REVOCATION OF CLUB MEMBERSHIP AND FORFEITURE OF MONEY PAID, UPON VERIFICATION OF INTENT TO DECEIVE AWA & AFFILIATED CLUBS. READ THE AGREEMENT PRINTED ON REVERSE SIDE OF THIS APPLICATION, AND IF FULLY UNDERSTOOD, SIGN BEFORE SUBMITTING APPLICATION FOR APPROVAL.

APPLICANT SIGN HERE(X) DATE / / TOTAL DUE \$, PAID \$, BAL. DUE \$

FOR OFFICE USE ONLY: APPROVED, DATE, PHOTO, BOOK, ID, VEH ID, COMPUTER, AWA MEMBER #
CLASSIFICATION(Circle): Standard, Corporate, Group. Dues frequency: Amount of each payment, starting on / /
ANNUAL RENEWAL ANNIVERSARY BASIS: Fiscal Calendar Year FIRST ANNUAL ANNIVERSARY DATE / / Memo REVI-25-11

