



CLUB Memembership Application

Applicant: _____

Date of Birth _____

Name of Spouse: _____

Date of Birth _____

Home Address: _____

Home Tel: (____) _____

City State Zip

Home Fax: (____) _____

E-mail address: _____

Cell Phone: (____) _____

Business _____

Office Tel: (____) _____

Address _____

Office Fax: (____) _____

City State Zip

Sponsored by: _____

Office Tel: (____) _____

Additional Reference: _____

Office Tel: (____) _____

Applicant Signature: _____ Date: _____

Please check which membership you desire.

Membership:	TYPE	INITIATION FEE	ANNUAL DUES
_____	Full Family	\$6,000.00	\$3,000.00
_____	Corporate	\$16,500.00	\$8,500.00

Thank you for joining Prospect Hall...The Best of Shooting and Hunting to you!

PROSPECT Hall.com

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