RACINE INSTINCTIVE BOWMEN
MEMBERSHIP APPLICATION

Name:		Date of Birth:
Current address:		
City:	State:	ZIP Code:
Phone:	E-Mail:	
TYPE of MEMBERSHIP DESIRED (Please circle one)	**ANNUAL DUES****	**ONE-TIME INITIAL FEES**
Individual Adult (18+)	$96 (includes WBH)	$25-Application + $5 card
Junior (12 – 17)	$12	None
Cadet (Under 12)	No fees	None
Family	$132 (includes WBH)	$25-Application + $5 card
Spouse name:		Birth Date:
Children's Names:		Birth Date:
Children's Names:		Birth Date:
Children's Names:		Birth Date:
Children's Names:		Birth Date:
FOR RIB USE:		
Application / Fee Received On:		Date:
Letter of Acceptance Sent:		Date:
Board Approval Date / Probationary Period Begins:		Date:
First-year dues Received (Pro-rated if necessary), Door Card Fee Received:		Date:
Probationary Period Ends / Senior Membership Begins:		Date:
Signature of applicant:		Date:
RIB SPONSOR NAME:		
Signature of sponsor:		Date:

** NEW MEMBERS: RIB's MEMBERSHIP YEAR RUNS SEPT. 1st TO AUG. 31st.
YOUR ANNUAL DUES WILL BE PRO-RATED DEPENDING ON MONTH YOUR MEMBERSHIP BEGINS.
Payment for your dues (prorated or full) is due at the meeting where your membership is approved.

Forms should be put in Vice President's box or mailed to:
Mike Spitzer
10845 W. St. Martins Rd.
Franklin, WI. 53132