

Application for Membership
York Chapter #67
Izaak Walton League of America

Full Legal Name, first, middle, last
(nick names in parenthesis): _____

Address: _____

City: _____ State: _____ Zip code: _____

Telephone: _____ Date of birth: _____

Primary Email (no work or school please): _____

Have you ever been convicted of a crime? Yes ___ No ___ Please elaborate if you answered "Yes"

Your signature below gives us permission to conduct a required background investigation.

Signature: _____

Spouse's name (if spousal membership) _____

Telephone: _____ Date of birth: _____

Primary Email (no work or school please): _____

Have you ever been convicted of a crime? Yes ___ No ___ Please elaborate if you answered "Yes"

Your signature below gives us permission to conduct a required background investigation.

Signature: _____

Reason for joining?

We only share you name and address with the national organization, we share nothing else to anyone else ever.

Applicants please read but do not fill our area below this line

- You must attend a Chapter Work Detail (see calendar on website for details)

Work Detail Date: _____ Signed by: _____

- You must attend an Orientation (see membership on website for details)

Orientation Date: _____ Signed by: _____

- You must attend a Membership Meeting after notification of acceptance to receive your cards(see calendar on website for details)

Open Meeting Date: _____ Signed by: _____

- This application must be submitted with all fees at the orientation

(Single membership \$110 per year plus \$75 initiation fee = \$185)

(Spousal membership \$167.50 per year plus \$75 initiation fee = \$242.50)

Amount accepted: _____ Received by: _____

Background check results: _____ Date: _____

Board approved date: _____ Membership approved date: _____