



YORK CHAPTER NO. 67
IZAAK WALTON LEAGUE OF AMERICA
www.yorkiwa.org

7133 Ironstone Hill Road, Dallastown, PA 17313

APPLICATION FOR JUNIOR CHAPTER MEMBERSHIP



Name _____ Date: _____
(Last, First Middle)

Address _____

Phone # (Home & Cell): _____ Date of Birth _____ Age: _____
(Month Day, Year)

Are your Parents a current member of the Izaak Walton League? ☐ YES ☐ NO Grade in School _____

Parents names _____

Parent's Address & Phone numbers (if different) _____

Parents E-mail address: (to send group activity info & updates) _____

Who to Contact in case of emergency: _____

Emergency Contact's Phone numbers: _____

Do you have any Allergies or Conditions we need to be aware of? _____ If so please list _____

Why do you wish to join the Junior Chapter? _____

What are your hobbies & interests? _____

E-mail address(es): (to send group activity info & updates) _____

If accepted into membership, will you promise to abide by all rules and regulations of the Junior Chapter, and to obey any instructions given by the Grounds Keeper, Senior Members, Junior Chapter Chairman, and Junior Chapter Committee Members? Answer: ☐ YES ☐ NO

Signature of Applicant _____ Date: _____

Signature or Parent or Guardian _____ Date: _____

***PHOTO RELEASE:** I will allow photos of my child to be used in club promotion purposes ☐ YES ☐ NO

*Signature or Parent or Guardian _____ Date: _____

Signature of Senior Member recommending applicant _____ Date: _____

Signature of Junior Member recommending applicant _____ Date: _____

Accepted or Rejected for Membership: _____ Date: _____

Signature Junior Chapter Chairman or Membership Chairman: _____ Date: _____

If mailing renewal form send with the \$5.00 annual dues to:
IWLA 67 JUNIOR CHAPTER, 7131 Ironstone Hill Rd., Dallastown, PA 17313