

FAMILY Membership Application

PO Box 6755, Lincoln, NE 68506

Supporting conservation of our natural resources

Call Wes at 402.466.9040 for Regular, Student or Life member classifications.

PLEASE PRINT CLEARLY

Today's Date _____

Family Member #1 Name (First, Mid Initial, Last) _____ Birthdate Member 1: ____/____/____

Family Member #2 Name (First, Mid Initial, Last) _____ Birthdate Member 2: ____/____/____

Address _____ City _____ State _____ Zip _____

Member #1 Phone _____ Email _____

Member #1 Employer _____ Member #1 Position _____

Member #2 Phone _____ Email _____

Member #2 Employer _____ Member #2 Position _____

_____ Family Member #1: Are you allowed to legally own a firearm? (Answer YES or NO)

_____ Do you have a Hunter Education certificate? If so, what is your number? _____

_____ Family Member #2: Are you allowed to legally own a firearm? (Answer YES or NO)

_____ Do you have a Hunter Education certificate? If so, what is your number? _____

The monthly Lincoln Izaak Walton League newsletter will be sent to members via email address unless otherwise noted.

VOLUNTEER OPPORTUNITIES:

Would you like to be called to volunteer your services for:

Conservation Activities _____ Political Issues _____ New Shooter Instruction _____ Hunter Safety _____

Range Maintenance _____ New Construction _____ Other (explain) _____

****We are a volunteer organization and your support of such is appreciated.***

Membership Year: January 1, 2024 - December 31, 2024

check one Membership RENEWAL OR NEW Membership

<input type="checkbox"/> Membership and Rifle/Pistol card 7/25/75/100 yard ranges	\$ 260.00
<input type="checkbox"/> Membership and Self-Use Auto Trap Card (Plus targets thrown)	\$ 235.00
<input type="checkbox"/> Membership, Rifle/PistolCard and Self-loading trap card(Plus targets)	\$ 300.00
<input type="checkbox"/> Gate Key-Card (one time deposit required for New Members)	\$ 20.00
<input type="checkbox"/> Trap Reading Target Card (one time deposit required for New Trap Members)	\$ 20.00
<input type="checkbox"/> Ike's Membership ONLY (no range privileges)	\$ 195.00
<input type="checkbox"/> I would also like to give a charitable donation to the Lincoln Ikes.	\$ _____

CHECK # _____ DATE _____/_____/_____ \$ _____ TOTAL

NEW MEMBERS ONLY: Year + Membership for July 1, 2024 - December 31, 2025

<input type="checkbox"/> Membership and Rifle/Pistol card 7/25/75/100 yard ranges	\$ 355.00
<input type="checkbox"/> Membership and Self-Use Auto Trap Card (Plus targets thrown)	\$ 330.00
<input type="checkbox"/> Membership, Rifle/PistolCard and Self-loading trap card(Plus targets)	\$ 395.00
<input type="checkbox"/> Gate Key-Card (one time deposit required for New Members)	\$ 20.00
<input type="checkbox"/> Trap Reading Target Card (one time deposit required for New Trap Members)	\$ 20.00
<input type="checkbox"/> Ike's Membership ONLY (no range privileges)	\$ 290.00
<input type="checkbox"/> I would also like to give a charitable donation to the Lincoln Ikes.	\$ _____

If you would like more information, please contact our Membership Chairman, Wes Sheets, at 402.466.9040 or wsheets@radiks.net. We are a 501(c)(3) tax-exempt non-profit organization. All donations, big and small, are charitable contributions and as such are tax deductible and are warmly welcomed.

CHECK # _____ DATE _____/_____/_____ \$ _____ TOTAL

ALL RANGE CARDS FOR NEW MEMBERS REQUIRE ORIENTATION OF RANGE RULES AND SAFE TRAP USE.

All memberships are subject to approval by the Board of Directors.

I certify as follows:

- * All information provided in this application is true and correct to the best of my knowledge.
- * I agree to comply with the range rules and procedures of the Lincoln Izaak Walton League and accept full responsibilities for any other person(s) accompanying me to the range.
- * I understand that if I or anyone else in my party damages, destroys or otherwise disfigures the Lincoln Izaak Walton League property, I will be held responsible.
- * I will see that the proper firearm safety and procedures are practiced at all times.

Signature of Member #1/Applicant

Date

Signature of Member #2/Applicant

Date

PAYMENT OPTIONS:

- 1) Cash
- 2) Check - Please make your check payable to the: **Lincoln Izaak Walton League**
- 3) Credit Card: Visa, Mastercard, or Discover Card (complete the following information below):

_____ I would like to cover the credit card processing fees for this payment (fees are generally 3.25-4.25%).

Account # _____ -- _____ -- _____

Expiration Date: Month _____ Year 2 0 _____ C V V #: _____

Amount of Transaction \$ _____ **Signature** _____

For more information about our Lincoln Ikes chapter and memberships:

- 1) consult our website at: www.lincolnikes.com
- 2) contact our Managers via phone: Craig (402.499.9767) or Natalie (402.474.6555)
or email at: ikes.lincoln@gmail.com
- 3) call Membership Chairman: Wes Sheets (402.466.9040)
or email at: wsheets@radiks.net

(OFFICE USE ONLY)	
Date Orientation Completed	_____
Payment Processed / Deposit	_____
lincolnikes	_____
iwla	_____
New / Renewal #	_____
Master Memberships xls	_____
Gate Card	_____
Trap Card	_____
New Membership Card	_____