

# THE MUSKELLUNGE CLUB OF WISCONSIN



## Annual Membership Dues Renewal Form

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Date of Birth / Junior: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Do you wish to have your home address shown in the club directory?	Yes	No
Do you wish to have your phone number shown in the club directory?	Yes	No
Do you wish to have your E-mail address shown in the club directory?	Yes	No
Do you wish to receive the Club Newsletter by e-mail?	Yes	No
Do you wish to receive other Club Updates, meeting notices by e-mail?	Yes	No

**Renewals must be postmarked by March 31 of the current year.  
If your membership card displays the current year, you do not have to renew.**

<b><u>Dues:</u></b>	<b><u>Qty</u></b>
Junior Membership - \$10	_____
Single Membership - \$22	_____
Couples Membership - \$30	_____

**Club Address:**  
Muskellunge Club of Wisconsin  
PO Box 2284  
Brookfield, WI 53008-2284

**Total: \$** \_\_\_\_\_

Send form and money to the club address  
Or bring form and money to a monthly meeting.

Email: [info@muskellungeclubwi.org](mailto:info@muskellungeclubwi.org)  
Web Site: [www.muskellungeclubwi.org](http://www.muskellungeclubwi.org)