



MEMBERSHIP APPLICATION FORM

Date _____ Bushwacker Badge Number _____

First Name _____ Last Name _____

Alias _____ SASS # _____

Address _____

City _____ State _____ ZIP _____

Home Phone _____ Cell Phone _____

Email _____

MEMBERSHIP OPTIONS

NEW MEMBER

☐ \$95 New Member Number and Badge

☐ \$25 Annual Membership Fee

EXISTING MEMBER

☐ \$25 Annual Membership Fee

MAKE CHECK PAYABLE TO: **CT VALLEY BUSHWACKERS**

Bring your completed application to a Bushwacker event or mail it to:

Maureen Dotta

1316 South Grand Street

West Suffield, CT 06093