



# CONEWANGO CLUB

201 Market Street Warren, PA 16365  
Tel 814-723-6250 Fax 814-723-2320

Received \_\_\_\_\_  
Approved \_\_\_\_\_  
Plate \_\_\_\_\_  
Photo Card \_\_\_\_\_  
Notice Sent \_\_\_\_\_  
Payment Made \_\_\_\_\_

Date \_\_\_\_\_

To the members of the Conewango Club: The undersigned hereby makes application for:

- \_\_\_\_\_ Resident
- \_\_\_\_\_ Junior (Birth Date \_\_\_\_\_ )
- \_\_\_\_\_ Non-Resident

Membership in the Conewango Club of Warren, PA agreeing, if elected to membership, to be governed by the Constitution, By-laws, House Rules, and other regulations of said Club.

Accompanying this application, as required for Membership by the By-laws, is a 5x7 black and white photograph of the applicant, for permanent display in the Oak Room upon election.

Applicant's Name \_\_\_\_\_ Spouse's Name \_\_\_\_\_

Profession or Business Affiliation \_\_\_\_\_

Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

Applicant's Signature \_\_\_\_\_ Email Address \_\_\_\_\_

Number of Children & Ages \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

I recommend above applicant for membership \_\_\_\_\_

We endorse above applicant for membership \_\_\_\_\_

\_\_\_\_\_