

# ELLSWORTH SPORTSMEN'S CLUB, INC

MAILING ADDRESS: PO BOX 300, ELLSWORTH, PA 15331  
20 TEN MILE LANE, SCENERY HILL, PA 15360  
724-945-5275 [ellsworthsportsmensclub@gmail.com](mailto:ellsworthsportsmensclub@gmail.com)

## 2026 APPLICATION FOR RENEWAL MEMBERSHIP

(Please Print Clearly and Completely)

Memberships received or postmarked after February 1, 2026 will be returned  
and a NEW Member application required.

**Membership Type:** Individual Adult: ☐ (Age 18-64; \$30) Married Couple: ☐ (\$45)

Junior: ☐ (Age 15-17; \$20) Military/Veteran/First Responder: ☐ (\$20)

What was your previous member number(s)? \_\_\_\_\_ ☐ 2025 CARD RECEIVED

Name: \_\_\_\_\_  
(LAST) (FIRST)

Email: \_\_\_\_\_

Phone #: \_\_\_\_\_

Name: \_\_\_\_\_  
(LAST) (FIRST)

Email: \_\_\_\_\_

Phone #: \_\_\_\_\_

*I, the undersigned, agree to abide by the Rules & Regulation and ByLaws of the Ellsworth Sportsmen's Club, Inc. I further pledge to not hold the Ellsworth Sportsmen's Club liable for any unsafe or unforeseen accidents that could accrue on Club property. I acknowledge that Club membership runs from January 1st through December 31st of the year.*

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### CLUB USE ONLY:

Applicant Rec'd by : \_\_\_\_\_ Amount Rec'd: \$ \_\_\_\_\_ Cash/Check

Club Officer Signature of Acceptance: \_\_\_\_\_

Date: \_\_\_\_\_

☐ Membership Number Issued: \_\_\_\_\_