

## V1 RANCH CONFIDENTIAL MEMBERSHIP APPLICATION

	Boy 10			CALIFORNIA,	02060
P.U.	DUX IU,	PALOIVIAN	WOUNTAIN,	CALIFURINA,	92000

Phone: (	760) 782-3000	Fax: (858	) 679-6799
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Name:	_ Date of Birth:	Age:		
Driver's License #:	Expiration Date:			
Hunting License #:	Season:			
Phone Numbers: Home ( )	Cell ( )			
Email:	SSN#:			
Street Address:	[]c	heck here if new address		
City, State & Zip:				
Company Name (Corporate Membership Only):				
Emergency Contact: Name	Relationship:			
Home ( )	_ Cell ( )			
Have you ever been convicted of a game violation? □Yes □No				
If yes, please explain				
Have you ever been convicted of a felony? □Yes □No				
If yes, please explain				
Do you have any extreme allergies or medical conditions? □Yes □No				
If yes, please explain				

NOTE: IGNORANCE IS NEVER AN EXCUSE FOR BREAKING RULES OR GAME LAWS. Will you have the courtesy to read and understand all V1 Ranch rules and by-laws and to call the office if you are not clear on any matter? 
Q Yes QNO

To my knowledge, the information contained herein is true and accurate.

I have enclosed \$ \_\_\_\_\_\_ toward the purchase of: \_\_\_\_\_\_

I understand that my membership must be paid in full and that I will be required to sign a current copy

of V1 Ranch Rules and Regulations, prior to hunting.

Signature of Applicant	Date				
Membership begins on Date:	Membership ends on Date:				
V1 Ranch Membership #:					
PAYMENT METHOD					
Card #:	_ Exp. Date: CCV:				
Check #: Amount received: \$	Date received:				
Check Cash Visa MasterCard American Express (Please Circle One)					

P.O.Box 10, Palomar Mountain, CA 92060 Tel: 760-782-3000