

RESPONSIBILITY OF SPONSOR TO THE CLUB

How well do you know the proposed? _____

What social contact have you had with the proposed? _____

What are your business relationships with the proposed? _____

Would you vote in favor of the proposed were you at the present time acting in behalf of the Club and serving on its Board? _____

Do you know of any personal habit which would give rise to reasonable criticism or any objectives to other members of the Club? _____

Comments _____

Sponsor

I second this proposal _____

Comment _____

MEMBERSHIP COMMITTEE

Recommended _____

Deferred _____

Rejected _____

Sponsor notified _____

BOARD OF DIRECTORS

Elected _____

Deferred _____

Rejected _____



THE
Outing
CLUB

— EST. 1891 —



*Application for
Membership*



EXCERPTS FROM BY-LAWS

“Social Resident members shall be all those residing in Scott County, Iowa, or Rock Island County, Illinois, herein sometimes referred to as the ‘Social Resident Area’ and shall pay a membership fee as established by the Board of Directors upon election to membership, and annual dues as established by the Board of Directors, due and payable in advance on July 1st of each year; providing, however, that each member may pay said dues in four equal quarterly installments on the 1st day of July, October, January and April of each year or two equal semi-annual installments on the 1st day of July and January of each year.” There is an additional fee that equals \$100 plus tax per year if paying quarterly or semi-annually.

“Suburban Non-resident members shall be classified as all those members who reside permanently outside of Scott County, Iowa, or Rock Island, Illinois, and such members shall pay a membership fee as established by the Board of Directors upon election to membership, and annual dues as established by the Board of Directors, Payable in advance on July 1st of each year.”

“Failure of any member to pay his or her dues, membership fees, accounts or other form of indebttness owing to the Outing Club, within 90 days after they become due, shall cause such member to stand suspended from membership, upon appropriate action by the Board of Directors. If said debt remains unpaid at the end of 30 days after the member has been suspended his membership shall be terminated upon appropriate action by the Board of Directors."

I hereby understand by signing this document and upon approval of membership, I will adhere to the by-laws of the Outing Club as stipulated pertaining to membership. I will be responsible for all attorney fees if a suit is filed.

CLASSES OF MEMBERSHIP

A) Social/Resident membership	\$3,128.68
All privileges of the club and resides in Scott or Rock Island County	
B) Suburban/Non-Resident membership	\$2,645.04
All privileges of the club and resides outside Scott or Rock Island County	
C) Junior membership	\$2,368.98
Annual membership dues are determined by your age as of July 1 st	
Age 26 – 35	
Initiation fee (Due with Application)	\$1,605.00
Half off Initiation Fee until May 31 st , 2021	

All membership dues and fees are subject to Iowa State Sales Tax and are included in above pricing.

Date_____

Name of Applicant_____E-mail_____

I hereby apply for _____membership in The Outing Club.

Date of birth _____Social Security No.(required):_____

Residence: Address _____Tel. _____Cell Phone No. _____

City_____State_____Zip _____

Spouses name _____E-mail _____

Date of birth _____Cell Phone No. _____

Please include Adult and Dependent Children

Name	Birth date (mm/dd/yyyy)
_____	_____
_____	_____
_____	_____
_____	_____

Business/Employer, Applicant: _____Spouse: _____

Address _____Tel. _____Fax _____

(Street)(City)(St)(Zip)

Kind of Business, Applicant: _____Spouse: _____

Position occupied, Applicant: _____Spouse _____

Relatives who are or have been members _____

Credit Card (required): #_____Exp. Date:_____Circle one: Disc. Visa MC

Name as it appears on card: _____2% Charge will be applied to Credit Card Payments

Financial reference: _____

What Social Clubs are you presently a member? _____

Acquainted with the following members of The Outing Club: _____

Name four of your associates, whether they are members of this Club or not:

1. _____3. _____

2. _____4. _____

Has applicant requested membership previously? _____If so, what year? _____

Signature _____

Please be sure to complete all fields of Member Application
Please send a digital picture to info@theoutingclub.com