

Arlington-Fairfax Chapter, Inc.
Izaak Walton League of America
P. O. Box 366
Centreville, VA 20122-0366

Your current membership expires December 31, 2016.
Dues MUST be paid prior to January 1, 2017.
If \$50 Dues Credit claimed, 8-HOUR work slip MUST
accompany payment.

Renewals postmarked after January 1, 2017 - Add \$40 late processing fee!

Note: Your membership spot is not guaranteed if you are late.

Primary Member

Family Member

Membership Type: _____

Membership ID #: _____

Name(s) _____

Address – Street _____

City, State, Zip _____

(H) _____

Phone: (C) _____

(W) _____

Email: _____

Date of Birth: _____

- (1) **PRINT LEGIBLY AND FILL IN ALL** required information on this form. Clearly indicate any changes.
- (2) **SIGN THE MEMBER RELEASE ON THE BACK** of this form and return top part of form with 8-hour Dues Credit slip (if applicable) and your check made payable to AFC-IWLA.
- (3) Questions/payment arrangements? Call Cristina or Smitty at **703-631-4495** If necessary, leave your name and telephone number with your concern(s). Your query will be answered as quickly as possible.
- (4) If being reassigned to area far removed from Northern Virginia for 2 years or more, inquire about Inactive/Reserve status.

<u>REGULAR Membership Types</u>	<u>2017 Dues</u>	<u>FAMILY Membership Types</u>	<u>2017 Dues</u>
___ RG – Regular	\$211	___ FM – Family Regular	\$308
___ RGD or R or S – Regular (Disabled, Remote, or Senior)	\$171	___ FMD or R or S – Family (Disabled, Remote, or Senior)	\$233
___ LF – Life Regular	\$161	___ FL – Family Life Regular	\$233
___ LFD or R or S – Life (Disabled, Remote, or Senior)	\$121	___ FLD or R or S – Family Life (Disabled, Remote, or Senior)	\$158
___ LB – Life Benefactor	\$161	___ FB – Family Benefactor	\$233
___ ST – Student	\$152	___ FBD or R or S – Family Benefactor (Disabled, Remote, or Senior)	\$158

Remote – Residence is over 50 miles from the Chapter.

Senior – Over age 60 as of 12/31/2016.

My check # _____ in the amount of \$ _____ made payable to AFC-IWLA is enclosed.

PLEASE SIGN THE MEMBER RELEASE ON BACK OF THIS STATEMENT BEFORE RETURNING

Detach here and submit the TOP portion with payment

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2017 Membership Dues Paid \$ _____ Date _____ Check No. _____

For tax purposes. Regular (RG) members may claim a \$53 deduction and Family (FM) members may claim \$82. Life Regular (LF) (LB) members may claim a \$6 deduction and Family Life (FL)(FB) members may claim \$7. Students (ST) may claim \$42

The Izaak Walton League of America - a non-profit conservation organization - is recognized as a Section 501(c)(3) public charity under the Internal Revenue Code. Minimum National dues are \$40 for individuals and \$60 for family memberships, which includes the Outdoor America magazine. Magazine is inseparable from dues. Chapter and Division dues may vary.

MEMBER RELEASE

Range Badges, Membership Cards and the Gate Combination will not be furnished unless the completed Release Statement has been received by the Chapter. If this is a family membership, then both parties must sign.

RELEASE STATEMENT

In consideration of the permission granted to me to use the pistol, rifle, skeet, trap and archery ranges and other facilities of the Arlington-Fairfax Chapter, Incorporated, of the Izaak Walton League of America, Centreville, Virginia, I do hereby for myself, my heirs, executors, and administrators, irrevocably release and forever discharge the Arlington-Fairfax Chapter, Incorporated, of the Izaak Walton League of America (hereinafter "AFC-IWLA") and all of its officers, directors, agents and employees, acting in or under color of his or her official capacity, from any and all claims, demands, actions or causes of action, costs, charges, and liabilities of whatever kind, on account of my death or on account of any injury to me which may occur from any cause during my use of its ranges and/or facilities.

This release is intended to cover all injuries, fatal or non-fatal and illness of every name, type, kind, or nature and personal property damage, if any, which may be sustained or suffered from any cause whatsoever connected with or arising out of or by reason of participating in the aforementioned activities. I know the risks and unexpected dangers involved in said activities and assume all risks of injury to my person and property that may be sustained in connection with the stated and associated activities, in and about the installation.

I further agree that I will indemnify and will hold harmless the AFC-IWLA and all officers, directors, agents, and employees thereof from any and all costs, charges, claims, demands, and liabilities of any kind arising from the improper or negligent actions of the undersigned while participating in the activities of its property.

I have reviewed the AFC-IWLA Range Safety Rules and the Chapter Ground Rules and I understand and agree to abide by all the provisions therein. I have read and understood the foregoing release. I certify that my attendance and participation in activities at the AFC-IWLA is voluntary.

This release form is in effect as long as I am a member of the AFC-IWLA, or for so long as I may use the aforesaid ranges and/or facilities, both now and at any future times, but in no event longer than is permitted by applicable law.

Signature

Date

2nd

Signature (Family Member)

Date

IWLA Pledge

To strive for the purity of water, the clarity of air, and the wise stewardship of the land and its resources.

To know the beauty and understanding of nature, and the value of wildlife, woodlands, and open space.

To the preservation of this heritage and to man's sharing it, I pledge myself as a member of the Izaak Walton League of America.

