



**Chesapeake Chapter**  
 Safari Club International  
*"First For Hunters"*  
**WWW.CHEAPEAKESCI.ORG**

MEMBERSHIP APPLICATION

We welcome your application for membership in THE CHESAPEAKE CHAPTER OF SAFARI CLUB INTERNATIONAL. Our organization and it's members share a common interest in the challenges of wildlife management, habitat restoration, conservation and the hunting / shooting sports. Please join us in one of the area's premier hunting / conservation groups. To apply for Chapter membership, please fill out this application, enclose the appropriate fee **payable to – "Chesapeake Chapter, Safari Club International"** and forward it to:

Dr. Bill Strawberry, Treasurer  
 Chesapeake Chapter - SCI  
 1841 Cove Point Road  
 Annapolis, MD 21401  
 Phone: 410-266-3383 Email: billberry@comcast.net

Regular Members and affiliated Life Members enjoy all the rights and privileges of membership, including the right to vote at General Membership Meetings and be elected to Chapter office.

---

I enclose the sum of \$ \_\_\_\_\_. Please enroll me as a Chapter Member of the **Chesapeake Chapter of Safari Club International**.

TYPES OF MEMBERSHIP

- 1-YEAR - \$105** (National \$55 & Chapter \$50)      **3-YEAR - \$300** (automated renewal for 3 yrs)  
**LIFE MEMBER - \$1,550** (a one-time fee for National & Chapter)     **SENIOR LIFE - \$1,300** (Over 60)  
**YOUTH - \$15** (youth 17 and under have no annual Chapter dues)      **SABLES - \$30**

- EXISTING NATIONAL MEMBERS of SCI - \$50** (Chapter dues only)  
**EXISTING LIFE MEMBERS of SCI - \$50** (a one time affiliation fee, thereafter no annual Chapter dues)

All categories of members will receive full SCI benefits (see [www.scifirstforhunters.org](http://www.scifirstforhunters.org) ) as well as Chapter benefits, including the news magazine "Chesapeake Chatter" and notices of Chapter activities and events. All important Chapter information will be posted on-line at [www.chesapeakesci.org](http://www.chesapeakesci.org)

PLEASE "PRINT" ALL YOUR PERSONAL INFORMATION BELOW "CLEARLY" :

NAME: \_\_\_\_\_

ADDRESS : \_\_\_\_\_

CITY : \_\_\_\_\_ STATE : \_\_\_\_\_ Zip : \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL ADDRESS : \_\_\_\_\_

SCI NATIONAL OR LIFE NUMBER (if already a SCI National Member): \_\_\_\_\_

PAYMENT BY    CASH    CHECK    MC    VISA    OTHER \_\_\_\_\_

NAME ON CARD \_\_\_\_\_

CC# \_\_\_\_\_ EXP DATE \_\_\_\_\_