|  |  |  |
| --- | --- | --- |
| Member | | |
| Name | |  |
| Date | |  |
|  | | |
| Guest | | |
| Name | |  |
| Address | |  |
| Phone/Email | |  |
|  | | |
| Activity | | |
|  | |  |
|  | Guest Fee - $ | |
|  | Camper Dues - $ | |
|  | Workday Fine - $ | |
|  | Missing Jaw Bone Fine - $ | |
|  | 1st Non-quality Buck - $ | |
|  | 2nd Non-quality Buck - $ | |
|  | Cooler Fee - $ | |
|  | Membership Dues - $ | |
|  | Other - $ | |

Check appropriate box and fill in $ amount. If activity not listed, use Other box and provide reason.

Fill out form completely and give/send form and payment (preferably check) to WHC Treasurer:

Jerry Lemonds

PO Box761

Paw Creek NC 28130