POPE AND YOUNG CLUB
OFFICIAL MEASURER APPLICATION

NAME: (PRINT) ____________________________ MEMBER ID: ____________

ADDRESS: __________________________________________________________

CITY: ___________________________ STATE: __________ ZIP: ______________

EMAIL: ______________________________________________________________

HOME PHONE: (____)____-________ PERMISSION TO USE HOME PHONE
NUMBER? YES_____ NO______

WORK PHONE: (____)____-________ PERMISSION TO USE WORK PHONE
NUMBER? YES_____ NO______

OCCUPATION: ______________________________ DATE OF BIRTH: _______

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PLEASE INDICATE YOUR EXPERIENCE AND BACKGROUND IN MEASURING NORTH AMERICAN BIG GAME TROPHIES. INCLUDE REFERENCE TO AN ORGANIZATION FOR WHICH YOU CURRENTLY SERVE OR HAVE SERVED AS A MEASURER AND INCLUDE AN INDICATION OF THE LENGTH OF TIME YOU HAVE SERVED IN THIS CAPACITY (ATTACH ADDITIONAL SHEETS IF NEEDED).

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HAVE YOU EVER ATTENDED A CLINIC ON MEASURING BIG GAME? ____

IF YES, PLEASE INDICATE DATES AND CLINIC SPONSOR/LEADER:
HAVE YOU EVER BEEN CONVICTED OF A GAME VIOLATION? ________
   IF YES, PLEASE PROVIDE DETAILS: _____________________________

HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE? ________
   IF YES, PLEASE PROVIDE DETAILS: _____________________________

REFERENCE #1:
NAME_______________________ ADDRESS______________________________
CITY___________________STATE_____ZIP_________PHONE_______________
EMAIL______________________________________________________________

REFERENCE #2:
NAME_______________________ ADDRESS______________________________
CITY___________________STATE_____ZIP_________PHONE_______________
EMAIL______________________________________________________________

I do by signature attest that the above information is true to the best of my knowledge.

APPLICANT’S SIGNATURE________________________________ DATE_______