

## **Associate Membership Application**

**Full Professional:** Any person who is licensed and/or qualified to act as a professional hunter or outfitter. An applicant for full professional membership **must be proposed by two full professional members and provide information as requested on the supplemental membership form.** 

Associate: Any person or firm that associates themselves with IPHA's aims and objectives.

Please mark the appropriate class of member ( ) Full Professional: ( ) Associate:	ership: Registration \$100 - Annual subs \$100 - Total \$200 Registration \$100 - Annual subs \$100 - Total \$200
Name:	
Company Name: Postal Address:	
Office Phone:	Home or Cell:
Fax:	Email:
Name of proposer (must be a member):	
Expiry: S	Security Code
Signature for Credit Card:	
Objectives to which members pledge themselves:	
<ul> <li>*To promote, worldwide, the good management of wildlife.</li> <li>*To collaborate with governments on the conservation of flora and fauna.</li> <li>*To maintain a sportsmanlike concept of hunting.</li> <li>*To prevent illegal and unsportsmanlike practices.</li> <li>*To safeguard, worldwide, the interests of clients.</li> <li>*To represent, worldwide, the interests of professional hunters, outfitters and guides</li> </ul>	
Date:	Signature:

internationalprohunters@gmail.com - www.internationalprohunters.com Mail to: International Professional Hunters Association 503 Stephen St., Kerrville, TX 78028