

MEMBERSHIP APPLICATION



NEW RENEWAL DATE _____

NAME _____

STREET _____

CITY _____ STATE _____ ZIP _____

PHONE _____ CELL _____

E-MAIL _____

Have you ever been convicted of a felony?

(Because of the access to firearms)

YES

NO

Please check any of the following that interest you:

- HUNTING
- ARCHERY
- CAMARADERIE
- MARKSMANSHIP TRAINING
- TRAP SHOOT
- MUZZLELOADING
- OTHER (SPECIFY) _____
- CONSERVATION
- FISHING
- RIFLE
- PISTOL
- SHOTGUN
- COMMUNITY

Are you a member of the NRA? YES NO

OTHER ORGANIZATIONS _____

SPONSOR _____

SPONSOR _____

APPROVED _____