

# MEMBERSHIP APPLICATION



NEW ☐ RENEWAL ☐ DATE \_\_\_\_\_

NAME \_\_\_\_\_

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ CELL \_\_\_\_\_

E-MAIL \_\_\_\_\_

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Have you ever been convicted of a felony?

YES ☐

NO ☐

*(Because of the access to firearms)*

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Please check any of the following that interest you:

- |  |   |
|--|---|
| • HUNTING <input type="checkbox"/>               | • CONSERVATION <input type="checkbox"/> |
| • ARCHERY <input type="checkbox"/>               | • FISHING <input type="checkbox"/>      |
| • CAMARADERIE <input type="checkbox"/>           | • RIFLE <input type="checkbox"/>        |
| • MARKSMANSHIP TRAINING <input type="checkbox"/> | • PISTOL <input type="checkbox"/>       |
| • TRAP SHOOT <input type="checkbox"/>            | • SHOTGUN <input type="checkbox"/>      |
| • MUZZLELOADING <input type="checkbox"/>         | • COMMUNITY <input type="checkbox"/>    |
| • OTHER (SPECIFY) _____                          |   |

Are you a member of the NRA? YES ☐ NO ☐

OTHER ORGANIZATIONS \_\_\_\_\_

SPONSOR \_\_\_\_\_

SPONSOR \_\_\_\_\_

APPROVED \_\_\_\_\_