APPLE VALLEY GUN CLUB MEMBERSHIP APPLICATION

Membership Type		Regular Membership (\$120) Senior Membership (65+) (\$48) Associate Membership (5pouse, partner, or child under 18 or 23 if full time college student)									
PERSO	ONAL INFOR	MATION									
Full Na	Full Name				Nic	kname					
Memb	er's name if yo	ou are applying for	Associate Men	nbership							
Spouse's Name					s Naı	mes					
Mailing Address						- 1-		ST		Zip	
Physical Address					Ĭ.			ST		Zip	
Email Address					-	Phone	e #	-			
Preferi	red method of	contact (info is not s	old or shared)	US Post	al Se	ervice	Em	nail/V	Vebsite		Both
Date of Birth		Age Occ			upation						
Hobbies/Interests				A							
Shooti	ng Interests										
Where	did you hear a	about us?									
NRA I	NFORMATIO	N									
Туре	Annual	NRA Number				For official use:			Da	Date/Initials	
	Life Other	Expiration Date		Verified AVGC N commit			lembe	mbership			
QUAL	IFICATIONS									1	
author Do you	ity from posse	convicted of any crissing firearms? sical or mental disa						to [Yes	_	No No
	ONAL REFERI										
Name	200000000000000000000000000000000000000			Phone							
Name				Phone							
SPON	SOR INFORM	MATION - APPLE	VALLEY GUN	CLUB M	EME	BER					
Name (Printed)				Pho	ne	-					
Signature						e					
APPLI	CANT PLED	iE									
0	y that the abo	ve statements are t	rue and I pled	ge to abide	by a	all Club	Bylaws	s, Reg	ulation	ns, an	d Policie
Signat	ure of Applicar	nt					Date				