APPLE VALLEY GUN CLUB 2023 RENEWAL/CHANGE OF INFO

PERSONAL INFORMATION											
Full Name	е		Date:			I.D. Nickname:					
Regular Member (\$120)			enior Membe	up in 20	023) (\$48) 🗌 Associate			e Men	nber (\$0)		
MEMBER'S name if you are on as their Associate Member:											
Mailing Address:				City:			ST:	Zip) :		
Home Phone #:				ell Phone #:			•	•			
Email Address	:						•				
Date of Birth:				Age turn	ing this y	/ear:					
NRA INFORMATION											
	Annual		Annual Expiration Dat		e:						
Туре	Life Other		NDA Neurobana								
			NRA Number:								
AVGC RENEWAL INFORMATION (See Renewal Instructions for Detailed Information)											
Year or years included in this AVGC renewal (you can pay ah						2023	or _				
Was your 6 hour work requirement met in 2022? Yes No - I have enclosed an extra \$100 for											
Medical Exemption MUST include CURRENT						the work b	-				
medical waiver. Age Exemption = 80 in 2023. CURRENT medical waiver, or have aged								ageu out.			
Work fee, if applicable \$ Renewal Fee \$						Total	Fnclos	ed \$			
work iee, ii applicable 3			Nellewal Fee 3			Total Enclosed \$					

(MUST COMPLETE WAIVER INCLUDED IN PACKET)

AFFIX COPY
OF NRA
CARD

AFFIX COPY OF WORK CARD

Mail this document to: Apple Valley Gun Club Attn: Renewal, P.O. Box 1958, Victorville, CA 92393 (Please do not mail to the street address as it will be undeliverable)