

APPLE VALLEY GUN CLUB 2026 MEMBERSHIP RENEWAL

Date:

Please fill out all spaces CLEARLY. You will not receive important club information if your data is entered incorrectly because we can't read your input.

Full Name:

Memberships: Regular (\$160) _____ Senior (age 65+) (\$60) _____ Associate (\$0) _____

If Associate, who is the primary member?

Mailing Address: _____ City: _____ St: _____ Zip: _____

Contact Phone#: _____ Occupation: _____

Date of Birth: _____ Age you are turning this year: _____

Email PRINT CLEARLY:

NRA or CRPA Membership Information:

Type: Annual – how many years? _____ Life

Membership Number: _____ Expiration Date (N/A for life members): _____

Year or years included in this AVGC renewal (you can pay ahead): 2026 & _____

Was your 6 hour work requirement met in 2025? Yes No-I have enclosed an extra \$125 for the work buyout, or I have included a CURRENT medical waiver, or I have aged out. Age Exemption = 80 in 2026

Work Fee (if buyout): \$ _____ Renewal Fee: \$ _____ Total Enclosed: \$ _____

(MUST COMPLETE WAIVER INCLUDED IN PACKET)

AFFIX COPY
OF NRA OR
CRPA 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)

Rev 11/03/25 DBH