FOUR CORNERS RIFLE & PISTOL CLUB

Application for Membership

The NRA Pledge: I certify that I am a citizen of the United States of America and that I am not a member of any organization or group which has in any part of its programs-the attempt to overthrow the Government of the USA or any of its political subdivisions by force or violence; that I have never been convicted of a crime of violence, and if admitted to membership, I will faithfully endeavor to fulfill the obligations of good sportsmanship and good citizenship.

Four Corners R&P Club Pledge: *I further declare that I support the Constitution of the USA and swear not to support any movement that would close shooting facilities, deny access to public lands, restrict hunting sports, or in any way limit the rights of honest citizens to own firearms in a legal manner.*

Please enroll me as a member.

Renew

Regular Member: Any person who meets the above requirements and is over the age of 17. An Active Regular Member shall be entitled to hold office, vote, and enjoy all benefits & privileges offered by the Club. $30.00 ( ) Y/N

Key deposit if you are going to use outdoor range. One time Charge $15.00 ( )

Associate Member: A spouse of a Regular Member and who meets the above $ 7.00 ( ) Y/N

Junior Member: A child, under the age of 17, of a Regular Member or a member of the Club's Junior Shooting Program and meets the above requirements. One fee for family includes all Juniors. $ 7.00 ( ) Y/N

VIP Member: A person or entity who has provided valuable goods, services or goodwill to the Club and/or its members and shall include Active Military personnel. This type of membership carries no rights or privileges except to receive *The Crack Shot* newsletter.

NRA Membership One year's NRA membership (Attach NRA App) $35.00 ( )

If you are a current NRA Member: Mem# _____ **Exp Date** _____
(attach copy of your membership card)

TOTAL AMOUNT PAID _____

_____ _____ _____
(Print Name) **(Date of Birth)** **(Phone Number)**

_____ _____ _____
Mailing Address **City and State** **Zip Code**

_____ _____ _____
Associate Member Name (i.e. spouse) **(Date of Birth)** **2nd Phone**

Junior Member Name(s) **Birth Date**

_____

E-mail Address _____

By signing, I agree to the above pledges. _____ **Date** _____
Signature of Applicant

KEY NUMBER_____ **CARDER**_____ **SECRETARY SIGNATURE**_____
Revised 12/29/2010