



MarXman Gun and Archery Club
P.O. Box 655
Mentor, Ohio 44061



Application ID: _____

Revised 03/16
 NRA Affiliated B-1158

APPLICATION FOR MEMBERSHIP

Name: _____ Year Born: ____
 Address: _____ Age: ____

 Phone - Home: _____ Cell: _____ Work: _____
 Email: _____ Regular Mail: Yes/No
 Married: Yes/No Number of Dependents Living at Home - Son: ____ Daughter: ____
 Occupation: _____ Retired: Yes/No
 NRA Number: _____ NRA Membership Expiration Date: _____ (MM/YYYY)
 Reason for Joining: _____
 Sponsor Name: _____
 Other Clubs and Organizations: _____

Reload - Pistol: Yes/No Rifle: Yes/No Shotgun: Yes/No

Vehicle Information:

	License	Make	Model	Color
1	_____	_____	_____	_____
2	_____	_____	_____	_____
3	_____	_____	_____	_____
4	_____	_____	_____	_____

Emergency Points of Contact:

	Name	Home Phone	Cell Phone	Work Phone
1	_____	_____	_____	_____
2	_____	_____	_____	_____

Shooting Information

Shooting: Frequently/Occasionally

Participate in Matches:

Military: Yes/No Bench Rest: Yes/No Hand Gun: Yes/No Rim Fire: Yes/No
 Black Powder: Yes/No Shotgun: Yes/No Archery: Yes/No
 Other: _____

Interested in Receiving Instruction In:

Muzzle Load: Yes/No Pistol: Yes/No Rifle: Yes/No Shotgun: Yes/No
 Archery: Yes/No Reloading: Yes/No CMP: Yes/No Cowboy Action Yes/No
 Other: _____

Will Attempt to Attend Club Functions:

Work Party: Yes/No CMP: Yes/No Interclub Matches: Yes/No Public Matches: Yes/No
 Sight-In: Yes/No Swap Meets: Yes/No Social Function: Yes/No



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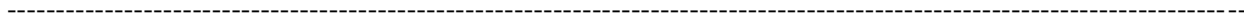
You are required to visit the range with your sponsor and introduce yourself to other members and obtain **at least two** member signatures **in addition to your sponsor**.

Sponsor Signature: _____

Date: _____

Applicant Signature: _____

Date: _____



Membership Committee Review

Reviewed By: _____

Date: _____