

MOLALLA RIFLE CLUB

P.O. BOX 696
MOLALLA, OR 97038
(503) 829-8843
mrc@molalla.net

MEMBERSHIP APPLICATION FORM

NAME: _____ Date: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____ E-MAIL ADDRESS: _____

OCCUPATION: _____ EMPLOYER: _____

What type of shooting most interests you? Rifle ___ Handgun ___ Shotgun ___

Black Powder ___ Other _____

NRA Membership # _____ Expiration Date _____

Note: Please enclose a photocopy of your current NRA membership card or an address label from a recent American Rifleman, American Hunter, or American Guardian magazine to verify your NRA membership.

Explain, briefly, why you wish to be a member of the Molalla Rifle Club:

I certify that I am a citizen of good repute of the United States of America; that I am not a member of any organization or group having as its' purpose or one of its' purposes, the overthrow by force and violence of the government of the United States or any of its' political subdivisions; that I have never been convicted of a crime of violence and that, if admitted to membership, I will fulfill the obligations of good sportsmanship and good citizenship.

Applicants Signature _____ Recommended by: _____

Initiation fee (New members only): \$50.00

Annual Dues: ___\$40.00 single ___\$50.00 family Amount Paid: \$ _____

Molalla Rifle Club assesses each member 12 hours of work bond or \$75.00 per year prorated from date of membership. Work bond is to be completed or paid at the end of each year of membership at the rate of 1 hour of work for the club or \$6.25 per month.

NOTICE: Membership Dues and Fees are subject to change upon approval by the membership of Molalla Rifle Club. Please contact the phone number or email address above to confirm current membership costs.

Accepted: _____ Rejected: _____ Reason for Rejection: _____

Secretary's Signature: _____ Date: _____