Rimersburg Rod & Gun Club

442 Rod & Gun Club Road
P.O. Box 669
Rimersburg, PA 16248

MEMBERSHIP APPLICATION – ALL INFORMATION IS KEPT CONFIDENTIAL

SELECT THE MEMBERSHIP CATEGORY BELOW YOU WISH TO APPLY FOR.
All membership amounts shown below ***include a $15.00 initiation fee***. All categories are for 1 member **except Family**.

____ Regular $45 (age 18 thru 64) _____ Senior $35 (age 65 thru 84) ____ Junior $31 (under age 18)

_____ Law Enforcement $35 ____ Family $60 (includes 1 Regular (primary) member and/or spouse/domestic partner/significant other and/or all children under age 18. **Everyone must reside at the same address.**)

PLEASE PRINT ALL INFORMATION---- BIRTH YEAR REQUIRED FOR ALL MEMBERS.

_____ _____ _____ _____
First Name (Primary Family Member) MI Last Name Birth Year Only

_____ _____
Mailing Address: Street or PO Box City, State, Zip Code

_____ _____
Area Code -Telephone Email Address

In the last 5 years, have you been convicted of Game or Fish Law violation, in Pennsylvania? _____YES _____NO
If yes, please explain: _____
_____

Do you swear to uphold all Game and Fish Laws? _____YES _____NO

Do you understand that as a member, if convicted of a Game or Fish Law violation, your membership may be revoked? _____YES _____NO

I have read and understand the **Rifle and Pistol Range Rules and Regulations** and agree to abide by them,
_____**YES** _____**NO** (Click **HERE** to read Range Rules and Regulations)

AS A CLUB MEMBER, YOU ARE REQUIRED TO ATTEND AT LEAST ONE MEETING OR HELP WITH AT LEAST ONE CLUB PROJECT PER YEAR, DO YOU AGREE WITH THESE TERMS? _____ YES _____ NO

All applicants must be sponsored by a current active member. Your Sponsor must sign the application.

_____ _____/_____/_____
Applicant's Signature Date

SPONSOR: _____ _____
Print Name **Signature**

========== *COMPLETE THIS SECTION FOR A FAMILY MEMBERSHIP ONLY* ==========

_____ _____ _____ _____
First Name (Spouse/Domestic Partner/Significant Other) MI Last Name Birth Year Only

CHILD'S NAME:FIRST, MI, LAST	BIRTH YEAR	CHILD'S NAME:FIRST, MI, LAST	BIRTH YEAR

Print and complete this application. Mail it along with your dues to the address at the top of this page.