



NEW BEDFORD REVOLVER & RIFLE CLUB



Mailing Address:
P. O. Box 40193
New Bedford, MA 02744

Street Address:
246 Bolton Street
New Bedford, MA 02740

Membership annual renewal application

This application is to only be used by existing members and is required on an annual basis with your dues payment. Your payment will not be processed unless accompanied by this application. To be sure your dues are recorded, be sure to include this application.

(Please Print or Type all of the information)

Name: _____

Home Phone: _____ Cell Phone: _____

Address: _____

City: _____ State: _____ Zip: _____ - _____

E-Mail Address: _____

Occupation: _____ Date of Birth: (mm/dd/year) ____/____/____

Name and address of present employer: _____

National Rifle Association Membership Number: _____ Expiration Date: ____/____/____

Gun Owners Action League membership number: _____ Expiration Date: ____/____/____

Other sporting organization: _____

A VALID LICENSE TO CARRY FIREARMS IS REQUIRED TO BE A MEMBER

LTC Permit Number: _____ Expiration Date: ____/____/____ Class: _____

IMPORTANT: All members are required to include a photocopy of your License To Carry Permit and either your NRA or GOAL membership card.

Enclose a check for \$90.00 annual dues for standard membership. If you are a senior member, your annual dues are only \$40.00. For more information on senior membership, please contact the executive board.

Signature: _____ Printed: _____ Date: ____/____/____

Please provide your Door Card Number: _____