



Gardner Rifle & Pistol Club, INC
P.O. Box 704, Gardner, MA 01440

Application for ASSOCIATE Membership

Please PRINT clearly

Application Date: ____ / ____ / ____

Applicants Name: _____

Address: _____ City / Town: _____

State: _____ ZIP: _____ Phone: _____

E-Mail: _____

Occupation: _____ DOB: ____ / ____ / ____

LTC / FID No.: _____ Sponsor's Name: _____
(sponsor should be current member)

How did you hear about the club: _____

Previous Shooting Experience: (Brief description and years) _____

Shooting Affiliations: N/A: GOAL: NRA: GOA: Other: _____

Previous / Current Club Affiliation (shooting and Other): _____

Only LEAD ammunition is to be used in the range.

The use of METAL, COPPER, or NYLON (Lipstick) Jacketed ammunition is STRICTLY ROHIBITED.

Signature: _____

Note: All applications must be reviewed and approved by the Executive Committee provided that the Club is accepting new members.

Note: If the person does not have a sponsor, assign a person to be their sponsor, someone they might know at the club or a volunteer.