



Membership Registration Form

By filing out and signing this form, you have read, understand, and agree to abide by the rules and regulations of the Goodland Gun Club. You understand this membership is nontransferable and dues are subject to change. *

Annual Membership Type Student \$20 Individual \$25 Family \$35 Date :
D D M M Y Y Y Y

First/Last Name :

PERMANENT ADDRESS (RESIDENCE)

City :
State :
Country :
Email :

Date of Birth :

Status : Married Single

NRA # :

Exp Date :

Signature :

CONTACT INFORMATION

Cell :
Home :
Email :

EMERGENCY CONTACT INFORMATION

Name 1 :

Phone 1 :

Additional Family Members

Members Name : Date of Birth :
NRA # : Exp Date : Signature :

Members Name : Date of Birth :
NRA # : Exp Date : Signature :

Members Name : Date of Birth :
NRA # : Exp Date : Signature :

Members Name : Date of Birth :
NRA # : Exp Date : Signature :

Members Name : Date of Birth :
NRA # : Exp Date : Signature :