

Annual Member Renewal	Life Member Renewal
Your Current Membership Number	
<b>Annual Renewal Membership Fee is \$80.00</b>	

# Cheyenne Rifle & Pistol Club

PO Box 571  
Cheyenne, WY 82003

## Membership & Renewal Application

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

### NRA Membership Status (needed for insurance purposes)

Are you an NRA Member?  Yes  No      NRA Number: \_\_\_\_\_  
 Membership Type     Life     5 year     3 year     Annual    \_\_\_\_\_ Other

I would like to receive notices about and would be willing to help with or volunteer for the following types of club activities:

<input type="checkbox"/>	Gun Show Volunteer	<input type="checkbox"/>	High Power Rifle Competitions
<input type="checkbox"/>	Personal Protection Training	<input type="checkbox"/>	Small Bore Rifle Competitions
<input type="checkbox"/>	Maintenance Crew	<input type="checkbox"/>	Construction Crew
<input type="checkbox"/>	Range Safety Officer	<input type="checkbox"/>	Range Clean-up
<input type="checkbox"/>	Junior Program Volunteer	<input type="checkbox"/>	Shooting Programs
<input type="checkbox"/>	Silhouette Shooting Competitions	<input type="checkbox"/>	Other Shooting Programs / Matches / etc.
<input type="checkbox"/>	Board of Directors	<input type="checkbox"/>	Are you an NRA Certified Instructor

I certify that I am over the age of eighteen (18), a citizen of the United States of America, and that I have never been convicted of any crime(s) of violence or of a felony. I affirm that it is my sole responsibility to keep myself informed of the current club rules and agree to follow all rules when on club property. ***I understand that failure to follow the rules or destroying club property is grounds for termination of my club membership.***

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Make checks payable to:  
Cheyenne Rifle and Pistol Club*

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**CLUB USE ONLY**

New Membership Number \_\_\_\_\_ Ck # \_\_\_\_\_ Rcvd by: \_\_\_\_\_