MID-CAROLINA RIFLE CLUB, INC.
P.O. BOX 2528, COLUMBIA, S.C. 29202-2528
www.midcarolinarifleclub.com

MEMBERSHIP APPLICATION

REQUIREMENTS: Any legal resident of the United States, eighteen years of age or older, who is a member of a national gun rights organization (National Rifle Association, Gun Owners of America, Jews for the Preservation of Firearms Ownership, or Second Amendment Foundation), may become a full member of this organization on a vote of two-thirds of the membership present at a meeting upon payment of the required membership fees and dues. Membership in the NRA, GOA, JPFO, or SAF may be obtained through the club. PROOF OF MEMBERSHIP IN GUN RIGHTS ORGANIZATION MUST BE PROVIDED AT TIME OF APPLICATION AT MEETING.

Member Level (Check one):

○ REGULAR: Household membership (includes up to 4 adults, see sheet 2 for information)$175.00 per year + $25 Application Fee
○ ASSOCIATE** (must live over 75 miles minimum straight-line from range): $100.00 per year + $25 Application Fee
○ JUNIOR (ages 12 to 18): $50.00 per year + $25 Application Fee

GIVEN NAME: _____
First **Middle** **Last**

If there are other adults (18 and above) in household that want access to the range, please complete "Add Family Member Form. They must also take the range briefing to receive a gate card and membership card.

MAILING ADDRESS: _____

City _____ **State** _____ **ZIP+4** _____

BIRTH DATE: ___ / ___ /_____ **SPONSOR:** _____

E-MAIL ADDRESS: _____

HOME PHONE: _____ **CELL PHONE:** _____

REASON FOR WANTING TO JOIN: _____

INTEREST: (Check all that apply) ☐ **COWBOY ACTION** ☐ **IDPA** ☐ **USPSA** ☐ **HIGH POWER RIFLE** ☐ **2700 PISTOL** ☐ **SILHOUETTE** ☐ **MUZZLELOADING** ☐ **BENCHREST** ☐ **SHOTGUN**

☐ **NRA,** ☐ **GOA,** ☐ **JPFO,** ☐ **SAF, MEMBER #:** _____ **EXP DATE:** _____
(Check one)

If accepted as a member, I will abide by all the by-laws, rules and regulations of the club. According to the legal requirements of the United States, I am able to purchase and possess firearms; and there is no other reason why I could not, or should not, own or use firearms.

SIGNED:_____ **DATE APPLIED:**_____
(Applicant's signature)