

SANTA MARIA GUN CLUB, INC.

3150 Telephone Road
P.O. Box 867
Santa Maria, California 93456
Phone (805) 925-6673
www.santamariagunclub.org

Member of:
National Rifle Association
Amateur Trapshooting Association
California Golden State Trapshooting Association

Organized in 1928. Incorporated Under the Laws of the State of
California as a Non-Profit Corporation March 20, 1937

Club Owned 40-Acre Trap Range
Indoor Smallbore and Pistol Range

MEMBERSHIP APPLICATION

This is my application for membership in the Santa Maria Gun Club, Inc. I certify that I am a person of good repute; that I am not a member of any organization or group having as its purpose or any of its purposes the overthrow by force and violence of the Government of the United States or any of its political subdivisions; that I have never been convicted of a crime of violence; and that, if admitted to membership, I will fulfill the obligations of good sportsmanship and good citizenship.

It is understood by me that no member of the Santa Maria Gun Club has any interest, beneficial or otherwise, in any property of the Club. It is also understood by me that, in the event of dissolution, all assets of the Club will be donated to other non-profit organizations to further the purposes for which this club was organized.

When using the Club's ranges and facilities, I will abide by all the rules for the safe handling of firearms which are recommended by the National Rifle Association of America, and I will not cause unnecessary damage to the Club's equipment. It is understood by me that any infraction of rules governing the safe handling of firearms by me may cause the Club to cancel my membership, and that said membership can be cancelled by the Board of Directors of the Santa Maria Gun Club, Inc., for infractions of said rules. It is further understood, that as a condition of membership, I will be expected to donate, if physically able, 12 hours per year for volunteer work parties.

Date _____ Signature _____

PLEASE PRINT OR TYPE THE FOLLOWING NECESSARY INFORMATION

NAME _____
(LAST) (FIRST) (MIDDLE)

ADDRESS _____ PHONE _____

CITY _____ ZIP CODE _____

DATE OF BIRTH _____ OCCUPATION _____

INTERESTS: TRAP _____ PISTOL _____ ARCHERY _____

Fees: \$80.00 yearly dues

Recommended by _____ Date accepted/Rejected _____