

Angels Gun Club Inc.

PO Box 842
Angels Camp, CA 95222

APPLICATION FOR MEMBERSHIP (Please Print)

Name _____
Mailing Address _____
City _____ Zip _____
Physical Address _____
City _____ Zip _____
Email address _____
Date of Birth _____ Place of Birth _____
Home Telephone _____ Business/work/Cell Phone _____
In case of emergency call: _____

- Are you a Citizen of the United States Yes _____ No _____
- Are you permitted to own a firearm? Yes _____ No _____
- Are you an NRA Member? Yes _____ No _____
- Have you been convicted of a felony? Yes _____ No _____

This form is only for applying for membership. Names will be placed on a perspective member list. An initiation fee of \$150 must be paid when you submit your application. Your \$150 will be refunded if your membership is not approved. At the time of your interview, you will be required to pay your yearly dues of \$100. The cost of your total membership will be \$250. You will be notified when you're being considered as a new member and you will then be required to meet with 2 Directors within 30 days along with your sponsor for final approval and payment of dues. A copy of the Angels Gun Club By-law will be given to you at interview.

I swear that I am a citizen of the United States of America, do not belong to any subversive group(s) and have never been convicted of a felony. I agree to abide by the by-laws of the Angels Gun Club Inc., along with promote and adhere to the safety provisions and measures at all times.

Signature of Applicant _____ Date: _____

Sponsoring Member _____

Sponsoring Member Signature _____ Date: _____

Date Submitted _____

The Angels Gun Club Board of Directors has sole discretion to approve any new members.

AGCsecretary1@gmail.com

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DO NOT WRITE BELOW

	Interview	Date:	By:
	Hold Harmless	Date:	By:
	Range Rules Issued	Date:	By:
	By-Laws issued	Date:	By:
	BOD Approval	Date:	
	Orientation	Date:	By:
	Card Issued	Date:	By: