



**FORT HARMAR RIFLE CLUB, INC.
P.O. BOX 475
MARIETTA, OHIO 45750**

MEMBERSHIP RENEWAL

(Please Print)

Name: _____

Address: _____

Telephone Number: _____

E-Mail Address: _____

If you have a family membership, please complete the following information to help us update our files. A family membership is limited to either spouse of the regular member or an unmarried dependent whose permanent residence is that of the regular member and whose age is between eighteen (18) and twenty-five (25).

FAMILY MEMBER NAME

BIRTHDATE

Five (5) Year Individual Membership \$300.00

Five (5) Year Family Membership \$400.00

Ten (10) Year Individual Membership \$600.00

Make Check Payable To: Fort Harmar Rifle Club

Club Use Only:

Member Card # _____