



Fort Harmar Rifle Club, Inc.
 P.O. Box 475
 Marietta, OH 45750

Membership Application - Please Print

Applicant's Name: _____ Birthdate: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-mail Address: _____

Occupation: _____ Employer: _____

If this is a family membership, please list all family member's names and birthdates:

Name: _____ DOB: _____

Name: _____ DOB: _____

Name: _____ DOB: _____

Name: _____ DOB: _____

Are you:

- A member of the NRA? Membership #: _____
- An NRA Instructor? Pistol: _____ Rifle: _____ Shotgun: _____ Other: _____
- A CHL Permit Holder? State: _____

Please check your areas of interest:

Rimfire Pistol: ___ Centerfire Pistol: ___ Rimfire Rifle: ___ Centerfire Rifle: ___ Shotgun: ___ Muzzleloading: ___ Reloading: ___ Hunting: ___

Instructing: ___ Concealed Carry: ___ Youth Activities: ___ IDPA: ___ 3 - Gun: ___ GSSF: ___ Silhouette: ___ Long Range Rifle: ___

What type of membership are you applying for:

- Individual \$95.00** (\$80.00 + \$15.00 initiation fee)
- Family \$125.00** (\$110.00 + \$15.00 initiation fee – includes spouse and children under 18)
- Junior \$20.00** (\$ 15,00 + \$5.00 initiation fee - a special waiver must be signed by the junior's parent or guardian)

By signing below, if accepted into the Club, I agree to abide by its Constitution and By-Laws and uphold the ideals of the shooting fraternity as well as maintaining the right to keep and bear arms as guaranteed under the Constitution of the United States of America. In addition, I agree to conduct myself in a safe and proper manner while on Club Property and be a representative of the best interest of the Club and the Community. I also understand that I am responsible to work at least two (2) Club sanctioned events per year. I also understand that I shall return all Club property that I possess when I leave the Club.

Applicant's Signature: _____ Date: _____

If an applicant does not have a sponsoring club member or a valid Concealed Handgun License, then proof of a background check by a Law Enforcement Agency must accompany the application.

Sponsor's Signature: _____ Date: _____

Sponsor's Printed Name: _____

Application must be accompanied by the correct dues and fees. Please make checks payable to Fort Harmar Rifle Club, Inc., and send them to the above address.

CLUB USE ONLY:

Club Acceptance Date: _____ Orientation Date: _____ Orientated By: _____ Member Card #: _____