

KLAMATH COWBOYS NEW MEMBERSHIP APPLICATION

(Please print)

Name: _____ SASS Alias: _____

SASS No: _____ E-Mail: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Telephone: (H) _____ (W) _____ (Cell) _____

Member of NRA? Yes _____ No _____ Membership# _____ Sportsman's Park# _____

OTHER FAMILY MEMBERS (each must fill out their own individual application)

Name _____ Alias _____ SASS# _____ KC# _____

Name _____ Alias _____ SASS# _____ KC# _____

Name _____ Alias _____ SASS# _____ KC# _____

CHECK MEMBERSHIP CHOICE: _____ Individual Membership Annual \$20 _____ Family Membership Annual \$30

I understand that I do not have to shoot to be a member, however, if I do shoot, I must demonstrate proficiency with firearms to be used and must be approved by the Klamath Cowboys prior to any shooting activities with the Klamath Cowboys. It is the intention of the Klamath Cowboys to always conduct itself on the principles of honesty and fair play. This conduct is to be reflected in the good behavior, honesty, integrity and general high standards of it's members. To this end, I hereby certify that I am an honest individual and will always conduct myself in the true "SPIRIT OF THE GAME"

Signature: _____ Date: _____

I am willing to work on the following committees: _____ Range Officer / Shooting Instruction _____ Target, Prop Construction.

_____ Other, please specify. Do you need instruction with proper and safe use of a firearm? Yes _____ No _____

I would like my name, phone number, addresses to be included in the membership roster, available to members. Yes _____ No _____

Please complete this form, and mail with check payable to: **Klamath Cowboys** Klamath.Cowboys@hotmail.com

**3939 S. Sixth St.#302
Klamath Falls, OR 97603
541-281-6162**

CLUB USE ONLY: Cash _____ Check# _____ Bank _____ Amount Pd _____ Date Pd _____

KC Membership Number assigned _____ Valid Through December 31, _____