

South River GUN CLUB

SOUTH RIVER GUN CLUB, INC.

5205 Highway 212 N
Covington, GA 30016

gunclubmanager1@gmail.com

Membership Application

NAME: _____

SPOUSE: _____

ADDRESS: _____

CELL PHONE: _____ OFFICE PHONE: _____

OCCUPATION: _____ EMPLOYER: _____

EMAIL ADDRESS (REQUIRED): _____

CURRENT NRA NUMBER (REQUIRED): _____

I have read, understand, and agree to comply with the General & Range Rules of the South River Gun Club, Inc. I certify that I am a Citizen of the United States; that I am a current member of the National Rifle Association; that I am not a member of any organization which has as any part of its program the attempt to overthrow the government of the United States by force or violence; that I have never been convicted of a crime of violence; and that, if admitted to membership, I will fulfill the Club's commitment to good sportsmanship and good citizenship.

SIGNED: _____ DATE: _____

DUES (FULL OR PRO-RATED): \$300 + \$10 (Gate Access Card)

NEW MEMBER SERVICE FEE: \$500 (Non-Refundable)

TOTAL AMOUNT ENCLOSED: \$810