UPPER SUSITNA SHOOTERS ASSOCIATION
DIRECTOR of MEMBERSHIP
P. O. Box 393
Talkeetna, Alaska 99676
Phone - 907-232-0517

U.S.S.A. LIFETIME MEMBERSHIP APPLICATION

Club Member #: [_____] **DOB: ____/____/____** (MO DAY YR) **Member Since: ____/____/_____** (MO DAY YEAR)

PLEASE PRINT NAME AS SHOWN ON DRIVER LIC. OR PICTURE ID (LEGIBLE)

Name Last: _____ **First**: _____(_____) **MI**: ____
(NIC-NAME)

Mailing Address: _____

City: _____ **State**: _____ **Zip**: _____ – _____

Primary Phone: _____ – _____ – _____ **Secondary Phone**: _____ – _____ – _____

Email: _____

Membership:
[__] LifeTime Member (Voting) $500.00

IT IS FOR LIFE THIS MEMBERSHIP WILL NOT EXPIRE!!

The Upper Susitna Shooters Association (U.S.S.A.) is dedicated to firearms and archery safety education as a public service. Marksmanship training as a contribution to individual preparedness for personal and national defense, and the sports of shooting, archery and hunting as a wholesome form of recreation.

In applying for membership in the U.S.S.A., I pledge to uphold and defend the Constitution of the United States of America, promote, and practice the safe use of firearms, respect the rights and property of others, and wisely use the natural resources of Alaska.

By affixing my signature to this document, I am affirming that I have no outstanding criminal warrants and have never been convicted of a felony or arrested for an immoral act.

Full Signature: → _____ Date: → _____

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Cash$_____ Check#_____ CC (___)Last 4#_____
MAKE

RSO on Duty:_____ID#_____ RSO Signature:_____
And B.O.D. or Representative & Print Legible please