



Membership Application & Questionnaire

Applicants must have a valid firearms License to Carry LTC permit or FID card to be accepted as a member.

A copy of the applicant's **LTC or FID card must be submitted with this application.**

Applicants when contacted/invited to Join will be required to attend a Club Orientation.

All Fees must be paid in full by check or money order, at the orientation and made out to:

Plymouth Rod & Gun Club.

Plymouth Rod & Gun Club is a family oriented, volunteer driven organization. Prospective members are NEVER screened or selected based on age, gender, country of origin, ethnicity or sexual orientation.

First Name: _____ MI: _____ Last Name: _____

Date of Birth: _____

Mailing Address: _____

Town: _____ State: _____ Postal Code: _____

Contact Phone Number: _____

E-Mail _____

Occupation: _____

Employer (optional): _____

LTC _____ FID _____ Expiration Date: _____

Town of Issue: _____

YOU MUST Submit a copy front & back of your LTC/FID with this Application

What interests you in joining a gun club, check all that apply:

Handgun Range: ___ Rifle Range: ___ Sporting Clays: ___ Skeet: ___ Trap: ___ Archery: ___ Fishing: ___

If you become a member, how often would you like to shoot? _____

Do you have firearms experience? Y/N _____

Describe in general: _____

Ply Rod & Gun Club is 100% volunteer operated. Are you interested in volunteering to help the club? Y/N _____

Do you have any specific skills that would assist the club? If so explain: _____

Tell us about yourself to help us get to know you better.

Have you ever been a member of this club? Y/N ___ What years _____

Are you a member of **GOAL** Y/N _____ Are you a member of the **NRA** Y/N _____

By completing and submitting this form, you expressly consent Plymouth Rod & Gun Club, it's officers and agents to review and retain the information provided herein.

You may submit this Application by mailing to: Plymouth Rod & Gun Club, PO Box 3121, Plymouth, MA 02360.

By E-Mail markvaz@aol.com or drop it off at the Upper clubhouse in the secretary's mailbox.

The entrance gate is open Sat. and Sun. mornings 9 AM – 12PM.

YOU MUST Submit a copy front & back of your LTC/FID with this Application

THE UNDERSIGNED CERTIFIES THAT ALL STATEMENTS CONTAINED HEREIN ARE TRUE AND ACCURATE

Date _____

APPLICANT'S SIGNATURE / parent or guardian's

***** For Executive Board Use Only*****

INITIATION FEE \$ _____ APPLICANT'S DUES \$ _____ TOTAL \$ _____

MEMBERSHIP APPROVED OR DECLINED BY EXECUTIVE BOARD _____ DATE _____