

Membership Application

PUTNAM COUNTY GUN CLUB

Mail: PCGC
P.O. Box 334
Eleanor, WV 25070

MEMBERSHIP OPTION - MEMBERSHIP YEAR RUNS FROM JULY 1st to JUNE 30th

NEW (First time ever applying)

RENEWAL

ACCESS CARD - LAST 5#

Table with columns: Check One, Membership Type, Fee, Normal Access to Range. Includes options for Annual, Early, 1/2 Year, and Spouse membership.

MAKE CHECKS PAYABLE TO PCGC

APPLICANT INFORMATION (PLEASE PRINT)

PRIMARY LAST NAME

PRIMARY FIRST NAME

MI

DATE OF BIRTH

CONTACT NUMBER

CONTACT EMAIL

SPOUSE LAST NAME

SPOUSE FIRST NAME

MI

LIST CHILDREN - FIRST NAMES ONLY

MAILING ADDRESS (STREET / PO BOX)

MAILING ADDRESS (CITY / STATE / ZIP)

NRA MEMBER #

I affirm that I am not prohibited by federal, state, or local law from possessing or owning a firearm.

INITIAL

I affirm that I have read, understand, and agree to follow the Standard Operating Procedures. I further acknowledge that I am responsible for reviewing and complying with the most current version of the Standard Operating Procedures on at least an annual basis, as posted on putnamcountygunclub.com

I certify that I have truthfully and accurately completed this application. I understand that providing false or incomplete information is ground for denial or termination of membership. My signature affirms my agreement with all statements and acknowledgments contained within this application.

PRIMARY SIGNATURE / DATE

SPOUSE SIGNATURE / DATE

MEMBERSHIP / TRO / BOARD SIGNATURE and DATE ORIENTATION COMPLETED

MEMBERSHIP INFO (Staff Only)