

# MEMBERSHIP AND NRA FORM

PLEASE COMPLETE ONE PER TEAM MEMBER OR SUBSTITUTE

Team Name: \_\_\_\_\_

Year: \_\_\_\_\_ Date: \_\_\_\_\_

## MEMBER INFORMATION

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Email Address: \_\_\_\_\_

☐ Yes, I would like to receive emails from Crooked Creek Trap Club

New Member? (Please circle one)          Yes          No

## NATIONAL RIFFLE ASSOCIATION (NRA) INFORMATION

PLEASE ATTACH NRA LABEL OR COPY OF NRA CARD BELOW

(Proof of NRA membership is required by CCTC)

NRA # \_\_\_\_\_

NRA Expiration \_\_\_\_/\_\_\_\_/\_\_\_\_

Choose one magazine by circling the format you would like to receive:

American Rifleman	Print	Digital	
American Hunter	Print	Digital	NONE
America's 1st Freedom	Print	Digital	
Shooting Illustrated	Print	Digital	

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For Office Use Only:

LEAGUE FEE \_\_\_\_\_ CCTC \_\_\_\_\_ NRA \_\_\_\_\_

TOTAL PAID: \_\_\_\_\_ Check # \_\_\_\_\_ Cash \_\_\_\_\_

Crooked Creek Trap Club | PO Box 588 | Granby, CO 80446

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