

SIN CITY MOUNTED SHOOTERS

www.sincitymountedshooters.com

2016 Membership Application



Membership type: _____ Single Membership \$40 _____ Family Membership \$60

Mail Checks: Trudy Lawrence 471 Hidden Garden Place Henderson, NV 89012

PLEASE MAKE CHECKS PAYABLE TO SCMS - \$25.00 FEE FOR RETURNED CHECKS

NAME: _____ SHOOTER NICKNAME: _____
ADDRESS: _____ CITY / STATE / ZIP _____
HOME PHONE: _____ MOBILE PHONE: _____
EMAIL ADDRESS: _____ CMSA #: _____ CMSA LEVEL _____
OTHER CLUB MEMBERSHIPS (check all that apply): _____ MSA#: _____ APHA#: _____ AQHA # _____

For Family Membership, please provide information for family members to include spouse and/or children under 21 residing in your home

NAME: _____ SHOOTER NICKNAME: _____
RELATIONSHIP: _____ MOBILE PHONE: _____
EMAIL ADDRESS: _____ CMSA #: _____ CMSA LEVEL _____
OTHER CLUB MEMBERSHIPS (check all that apply): _____ MSA#: _____ APHA#: _____ AQHA # _____

NAME: _____ SHOOTER NICKNAME: _____
RELATIONSHIP: _____ MOBILE PHONE: _____
EMAIL ADDRESS: _____ CMSA #: _____ CMSA LEVEL _____
OTHER CLUB MEMBERSHIPS (check all that apply): _____ MSA#: _____ APHA#: _____ AQHA # _____

NAME: _____ SHOOTER NICKNAME: _____
RELATIONSHIP: _____ MOBILE PHONE: _____
EMAIL ADDRESS: _____ CMSA #: _____ CMSA LEVEL _____
OTHER CLUB MEMBERSHIPS (check all that apply): _____ MSA#: _____ APHA#: _____ AQHA # _____

READ AND SIGN THE BOTTOM: The undersigned applicant hereby declares - that they and all family members are honest and law-abiding members of society; - that they and all family members are not prohibited by law from handling, using, or owning firearms or ammunition, - that they and all family have never been convicted of a felony or have criminal charges pending, - that they and all family agree to abide by the rules and practices of the SCMS, CMSA, CSA, NRA and other affiliated organizations, - that they and all family wish to become a member of the Sin City Mounted Shooters in order to enjoy all the rights and privileges granted to members in good standing as defined in the association by-laws.

Signed _____ Date _____

*******FOR CLUB USE ONLY DO NOT WRITE IN THIS AREA*******

Amount Tendered: \$ _____ Cash _____ Check # _____

Release Form(s) Signed and Enclosed _____

Received by: _____ Date _____