## **Old York Shootists**

## **Application for Membership**

Name:		DOB	//
Address:			_Apt
City:		_ State:	Zip:
Phone: ()	Fax: (	)	
Email			
SASS#	NRA#		
SASS Alias:			
west while at Old Yo	ork, will treat fellow s	hooters the wa	SS and the spirit of the sy you want to be all apply at Old York).
Signed:		Date	e://
Enclosed Amount: \$	_		
membership will be vote	quired to shoot two mate ed on by the Executive B bership fee will be accept	oard. You will l	York Shootists and then be notified in writing of
\$20.00 for two family m	s \$30.00 for the first year embers, and \$15.00 for t Hwy 31 Warrior AL 35	he third. Make C	
For Board Use:			
Membership Data Base	Email Data Base	Ce	ertificate Made