

Recommended by _____

MIDDLE GEORGIA GUN OWNERS ASSOCIATION, INC.
TWIN OAKS RANGE
P.O. BOX 4096. DUBLIN, GA 31040

Membership Includes Spouse and Children under 18

OFFICE USE ONLY

NAME _____ ADDRESS _____

CITY _____ STATE _____ ZIP _____ COUNTY _____

HOME PHONE _____ WORK PHONE _____

PLACE OF EMPLOYMENT _____ ADDRESS _____

MEMBER CARD No. _____ DATE JOINED _____ DATE RENEWED _____ OFFICE USE ONLY

FAMILY MEMBERS

CHARACTER REFERENCES

SPOUSE _____

NAME _____

ADDRESS _____

CHILDREN UNDER AGE 18

CITY/ST/ZIP _____

PHONE _____

RELATIONSHIP _____

NAME _____ AGE _____

NAME _____

ADDRESS _____

NAME _____ AGE _____

CITY/ST/ZIP _____

PHONE _____

NAME _____ AGE _____

RELATIONSHIP _____

MEMBER INTEREST

Please circle all that apply.

My interest in firearms use is:

1. HUNTING 2. TARGET SHOOTING 3. PROTECTION/SELF DEFENSE 4. COLLECTING 5. OTHER _____

I hunt with:

1. RIFLE 2. SHOTGUN 3. HANDGUN 4. BLACKPOWDER 5. BOW 6. OTHER _____

I am interested in target/competition shooting such as:

1. SILHOUETTE 2. NRA TARGETS 3. PINS 4. SKEET 5. TRAP 6. CLAYS 7. OTHER _____

I am interested in or shoot the following type (s) of guns:

1. RIFLE 2. SHOTGUN 3. HANDGUN 4. BLACKPOWDER: A. Muzzleloader B. Cartridge 5. AIRGUN 6. OTHER

I currently: 1. DO 2. DO NOT handload for A. RIFLE B. HANDGUN C. SHOTGUN

I would like to see educational programs on _____

Please list all other shooting/hunting organizations of which you are a current member. (NRA, NWTF, etc.) _____

Use back of form for additional information or comments.

I certify that I have read and understand the rules, regulations, and by-laws of the MIDDLE GEORGIA GUN OWNERS ASSOCIATION, INC. and will abide by and comply with them.

I certify that I am legally permitted to own and possess firearms in the State of Georgia. If my status changes, I will notify the MIDDLE GEORGIA GUN OWNERS ASSOCIATION, INC. immediately.

SIGNATURE _____ DATE _____