

SIERRA VISTA SHOOTING RANGE AND/OR GUN CLUB MEMBERSHIP APPLICATION

This form is used to apply for an Annual Range Pass and/or membership in any of the three coalition clubs that support and maintain this range for the Arizona Sportsman. **PLEASE PRINT CLEARLY...**

NAME: _____, _____ DATE: _____
(Last) (First) (MI) (Spouse)

ADDRESS: _____, _____, _____, _____
(Mailing address) (No & Street or PO Box) (City) (State) (Zip)

TELEPHONE: _____ EMAIL: _____ NRA (Yes or No) _____
Circle one (if Yes, give number)

There are three clubs which make up the coalition. **Place a check next to the club name you wish to join:**

- **COCHISE GUN CLUB** **Note: CGC MEMBERSHIP YEAR IS FROM 1 JULY THRU 30 JUNE**
(PO Box 1198, Sierra Vista, Az. 85636)
(contact membership chair Marilyn Anderson at 520-803-0904 with questions; club website: www.cochisegunclub.org)
- **SIERRA VISTA ROD & GUN CLUB**
(PO Box 453, Sierra Vista, Az. 85636)
(contact Al Lingo at 520-366-5664 with questions)
- **MONTEZUMA MUZZLELOADERS**
(contact Bill Mapoles at 520-378-4745 with questions)

As a gun club membership benefit, the coalition offers a discounted Annual Range Pass that entitles the holder to shoot whenever the range is open without additional cost. **You must be a club member to take advantage of this offer.**
Please circle the appropriate fee below:

	<u>Gun Club Fee Only</u>	<u>Discounted Range Pass Fee</u>	<u>Total Gun Club and Range Pass Fee</u>
SINGLE MEMBERSHIP	\$20.00	\$25.00	\$45.00 PER YEAR
FAMILY MEMBERSHIP	\$25.00	\$35.00	\$60.00 PER YEAR

Make checks payable to appropriate gun club.

Also, we offer a non-club member Annual Range Pass. The Annual Range Pass covers one calendar year starting on the date fees are paid. **Please circle the appropriate fee below** for an Annual Range Pass **WITHOUT** being a club member:

- SINGLE RANGE PASS **\$50.00 PER YEAR**
- FAMILY RANGE PASS **\$65.00 PER YEAR**

Make checks payable to Sierra Vista Shooting Range (information about events/clubs/fees at www.sierravistarange.org)

RANGEMASTER/SPONSOR _____ TOTAL PAID \$ _____
(signature)

----- CUT HERE -----
RECEIPT

NAME _____ DATE _____ TOTAL PAID \$ _____

CLUB JOINED: CGC _____, SVR&GC _____, MML _____, OR NONE _____

ANNUAL FEES, SINGLE _____ OR FAMILY _____

RANGEMASTER/SPONSOR _____