

**MONMOUTH COUNTY
RIFLE & PISTOL CLUB, INC.
MEMBERSHIP APPLICATION**
"PLEASE PRINT OR TYPE"

RETURN FORM TO: M.C.R.P.C.
c/o Membership
P.O. Box 2219
Farmingdale, NJ 07727-2219

Applicant's Full Name:			On becoming a member Social Security Number:		
Address:			Age:	Birth Date: / /	
City:	State:	Zip:	Home telephone:		
E-Mail:			Cellular telephone:		
Occupation:			Work telephone:		
NRA Membership Number:		Expiration:	N.J. Firearms ID Number:		

Please provide the **NAME, ADDRESS** and **TELEPHONE NUMBER** of two references **NOT** associated with the club.

1>

2>

I am a citizen of the UNITED STATES? YES () NO () (If NO, please explain)

Have you ever been arrested or convicted of a violent crime? YES () NO () (If YES, please explain)

Have you ever been or are you presently a member of any organization that advocates the overthrow of the government of the United States?
YES () NO () (If YES, please explain)

Please briefly state your particular interest(s) in firearms and your reason for wishing to become a member of this club.

Applicant must be a member of the National Rifle Association. Applicant 18 years of age or older must hold a current New Jersey (or state of residency) Firearms Purchaser Identification card. Applicant under the age of 18 must have written consent and a release signed by a parent or legal guardian. Applicant must complete a range orientation and live fire safety check. Upon completing the safety check, applicant will be scheduled to meet with the Membership Screening Committee. Applicant must appear before the screening committee and must pass an oral and/or written test administered by the membership committee. **Membership dues and initiation fee are payable at the completion of screening.** Applicant will be presented to the membership with the Screening Committee recommendation, whereupon the Club membership will vote on the applicant's acceptance as a member on probation. During the probationary period, new members must attend a minimum of four regular club meetings, and will be expected to participate in the club activities. The conduct and participation of the new member, during the probationary period, will be reviewed and evaluated in order to determine their eligibility and desirability for elevation to full membership status.

I certify that all information given herein is accurate and true, and I also understand the requirements for membership as set forth in this application.

FULL SIGNATURE: _____ Date: _____

**MONMOUTH COUNTY RIFLE & PISTOL CLUB, INC.
(APPLICATION CONTINUE)**

Minor Applicant Consent Form

I (please print) _____ Parent or legal guardian do hereby give my consent for _____, the applicant named herein to actively participate in the activities of the Monmouth County Rifle & Pistol Club, and will not hold the Club, or any of its members and/or officers responsible for any mishaps at the range, at its meetings or activities, or during transportation thereto or there from.

X _____
Signature of Parent or Legal Guardian

___ Not Applicable

FOR CLUB USE ONLY

Membership Number: _____

Date Submitted: _____

Range Orientation Date: _____

Range Officer: _____

Screening Committee Member #1: _____ YES ___ NO ___

Screening Committee Member #2: _____ YES ___ NO ___

Screening Committee Member #3: _____ YES ___ NO ___

Remarks: _____

MEMBERSHIP/INITIATION FEES: \$ _____

CHECK NUMBER: _____

NRA MEMBERSHIP: \$ _____

TOTAL: \$ _____