

# Pleasant Valley Renegades Membership Application

Print this form. Fill it out and Mail it to the address listed below.

Individual Membership \$40.00     Family Membership \$45.00     Member Information Update Only

**Member** \_\_\_\_\_ Phone # \_\_\_\_\_

Alias \_\_\_\_\_ SASS # \_\_\_\_\_

e-mail \_\_\_\_\_ NRA # \_\_\_\_\_

Street \_\_\_\_\_ Apt. # or P.O. Box \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**Family Member** \_\_\_\_\_ Phone # \_\_\_\_\_

Alias \_\_\_\_\_ SASS # \_\_\_\_\_

e-mail \_\_\_\_\_ NRA # \_\_\_\_\_

Street \_\_\_\_\_ Apt. # or P.O. Box \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**Family Member** \_\_\_\_\_ Phone # \_\_\_\_\_

Alias \_\_\_\_\_ SASS # \_\_\_\_\_

e-mail \_\_\_\_\_ NRA # \_\_\_\_\_

Street \_\_\_\_\_ Apt. # or P.O. Box \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

I hereby apply for membership with the Pleasant Valley Renegades. If accepted as a member, I affirm that I will abide by the rules, polices and by-laws established by the club, and that I will conduct myself at all times in a manner that will not bring dishonor to the club, and that I fully support the purposes and objectives of the club.

Member Signature \_\_\_\_\_ Date \_\_\_\_\_

Family Member or Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Family Member or Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Make Check payable to: **William Hopping**. Write in "**Pleasant Valley Renegades**" in the memo.  
Mail this form and payment to: **William Hopping, 2721 Dover Rd, Augusta, KY 41002** or bring it to the next club match.

Range Administration use only: Liability Waver(s) on File \_\_\_\_\_, Membership Approved \_\_\_\_\_