

# Application for Membership

Twelfth Precinct Pistol Club, Inc.

P.O. Box 26

Harwood MD 20776

The undersigned applies for membership in the Twelfth Precinct Pistol Club, Incorporated.

*Instructions:* Fill out form completely. Failure to complete all sections will result in rejection of application.

Name (print) \_\_\_\_\_  
Last First Middle Suffix  
Driver's License Number \_\_\_\_\_ State Date of Birth \_\_\_\_\_  
MM/DD/YY  
Place of Birth \_\_\_\_\_  
City State  
Citizen of the United States \_\_\_\_\_ (yes) \_\_\_\_\_ (no) Sex \_\_\_\_\_ (M/F) E-Mail \_\_\_\_\_  
(Initial)  
Residence Address \_\_\_\_\_  
Street address  
City State Zip code  
Telephone \_\_\_\_\_  
Day Evening

## CONSENT TO PUBLIC RECORDS CHECK

Have you ever been convicted of a felony, property crime, or crime of violence? \_\_\_\_\_ (yes) \_\_\_\_\_ (no)

I, \_\_\_\_\_, understand that the 12<sup>th</sup> Precinct Pistol Club, Inc (12<sup>th</sup> PPC) conducts a check of public court records on all applicants for membership. I hereby consent and authorize the 12<sup>th</sup> PPC to conduct a public court records check that will include a criminal history check and a sex and violent offender registry check. I understand and agree that the 12<sup>th</sup> PPC reserves the right to reject my application if, in the judgment of the 12<sup>th</sup> PPC, information developed in the course of the records check so warrants. \_\_\_\_\_ (signature)

Occupation \_\_\_\_\_

Principal Interest in this club \_\_\_\_\_ Firearms \_\_\_\_\_ Archery \_\_\_\_\_

Are you a member of the National Rifle Association? \_\_\_\_\_ Membership Number \_\_\_\_\_

Fees Enclosed (*attach to application*)

Initiation fee (*non-refundable*) \$50 \_\_\_\_\_ Dues \_\_\_\_\_ \$120.00 (*Join May 1-Oct 31*) \$60.00 (*join Nov 1-April 30*) +\$15 (*Family*)

Additional cardholder (*family membership only*) \_\_\_\_\_ (NAME) \_\_\_\_\_ (DOB)

Recommended by member: \_\_\_\_\_ Telephone Number \_\_\_\_\_

Signature of Recommending Member \_\_\_\_\_ Membership Number \_\_\_\_\_

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

(1) COMPLETED form received by Membership Chair (date/initials) \_\_\_\_\_ by Secretary (date/initials) \_\_\_\_\_

Fees attached: \$ \_\_\_\_\_ (non-refundable *initiation fee*) \$ \_\_\_\_\_ (*dues*) **Total \$** \_\_\_\_\_

(2) First Reading Date \_\_\_\_\_ Present? Y/N (3) Safety Orientation Date \_\_\_\_\_ Orientation officer \_\_\_\_\_

(4) Public Records Check Date \_\_\_\_\_ (5) Membership Committee Recommends: Disapproval/Approval

(6) Returned to Secretary (date) \_\_\_\_\_ (7) Date of 2<sup>nd</sup> reading & vote \_\_\_\_\_ Present? Y/N (must be present at 1 or more meetings) (8) Elected? Y/N

(9) Date card mailed \_\_\_\_\_ Membership number \_\_\_\_\_ (10) Roster updated \_\_\_\_\_