Carson Rifle and Pistol Club Membership Application



Date of Application:

CRPC Membership Application P.O. Box 113 Carson City, NV

info@carsonrapc.org www.CarsonRAPC.org **Applicant** Name: Date of Birth: Address: State: ZipCode: **Primary Phone:** Alt Phone Email: NRA Number **NSRPA Number Primary Categories of Interest** (Highpower Riflle Range Safety Officer Mini Palma Training ○ Bullseye Pistol O Public Service Other Annual dues are \$20 per calendar year; \$10 per additional associate or junior member. **Payment** Check # **Output** Check payable to CRPC Inc. () Cash (Please do not mail cash) **Total Submitted**