



19615 E Sprague  
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 www.spokanegunclub.org

1-509-926-6505  
 Fax 1-509-926-6061

- New Annual
- Annual Renewal
- Life Member Request

I hereby make application for membership with the Spokane Gun Club.

Date of Application: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

Hobbies/Interests: \_\_\_\_\_

How did you hear about the SGC? \_\_\_\_\_

Area(s) of interest:  Trap  Skeet  Both

Annual Membership \$50.00

\*\* Life Membership \$300.00

|                              |                             |
|------------------------------|-----------------------------|
| <b>Membership Committee</b>  |                             |
| Accepted:                    | <input type="checkbox"/>    |
| Hold:                        | <input type="checkbox"/>    |
| Rejected:                    | <input type="checkbox"/>    |
| <b>Card Issued</b>           |                             |
| Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| QB POS                       | <input type="checkbox"/>    |
| ACCESS                       | <input type="checkbox"/>    |

**\*\* Must be an annual member in good standing for at least one year to be eligible for Life Membership.**

Signed: \_\_\_\_\_

Proposed by:

\_\_\_\_\_ Life Member

\_\_\_\_\_ Life Member