New Member Application Franklin County Sportsmen's Club Inc.

Name		
Email Address	Phone	
Address		
Town	State	Zip
Membership Type (circle):	
Annual - \$165 Family - \$1	195 Senior (65+) - \$105	Student - \$90
If applying as a family, list na	ames and ages of children: _	
By Signing this document, I a law from possessing a firearm convicted of a felony, and tha possessing firearms and/or an	ns license in Massachusetts, at I am not prohibited by an	that I have not been
Signature:	Date:	
Mail completed application, new i	member questionnaire and relea	se and indemnity agreement to:
Membership Committee c/o l	Franklin	
County Sportsmen's Club In	c.	
POB 716		
Turners Falls, MA 01376		
Important !!!!		
Do not send any money with	vour application.	

You will be contacted by the membership committee to schedule an interview

Please specify best way to contact you to schedule an interview:

before any membership is approved.

MEMBERSHIP APPLICATION - 2019

Name	e Date
	New Member Questionnaire
1)	List TOWN, License Number and Date of expiration for current MASS LTC or FID:
2)	What facilities or activities at the club would you be using the most:
3)	This club depends on volunteers to perform much of the maintenance and run events. What skills or talents would you be able to contribute to the club?
4)	Do you know any current club members ?
5)	Do you have or had any of the following:
Huntir Hunte	A Certification
Partici	ipated in any sanctioned rifle, pistol or shotgun competition (list any):
List ar	ny Law Enforcement or military background:
Are yo	ou a member of any shooting or hunting organization such as NRA, GOAL, or NWTF?
Are yo	ou experienced enough to be able to demonstrate SAFE handling of : (YES or NO)
Revol	ver ?
Semi-	Auto Handgun ?
Rifle ?	?
Shotgi	un ?

Membership Questionnaire - 2019