



**Promoting Firearms Safety, Marksmanship Training
& Competitive Shooting**

**P.O. Box 296, Lodi, WI 53555
Affiliated with the NRA, Wisconsin-Force and CMP**

APPLICATION FOR FULL MEMBERSHIP

**High Power Rifle Range
100-1200 Yards**

High Power Silhouette

NRA Bullseye Pistol

USPSA Action Pistol

Practice Range

**Pistol & Small Bore
Steel Range**

Bench Rest Facilities

**Indoor Range
W10219 Larson Drive
Lodi, WI 53555
608-592-4300**

**Junior Marksmanship
Program**

Hunter Education

NRA Certified Instructors

I, the undersigned, hereby apply for membership in the WINNEQUAH GUN CLUB. I am a member of the National Rifle Association, or have submitted a membership application to them.

I agree to abide by the rules of the WINNEQUAH GUN CLUB and the NATIONAL RIFLE ASSOCIATION. I also subscribe to the NRA pledge.

I certify that I am a citizen of the United States; that I am not a member of any organization which has as any part of its program the attempt to overthrow the government of the United States by force or violence. I have not been convicted of a felony, attempt to commit a felony, or domestic violence, and am not under investigation for committing a felony. I give consent to a criminal history background check, and that if admitted to membership, I will fulfill the obligations of good sportsmanship and good citizenship.

Signed: _____ Date: _____

***** (PLEASE TYPE OR PRINT) *****

Full Name: _____
(First) (Middle) (Last)

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: (Home) _____ (Bus) _____ (Cell) _____

E-Mail: _____

Birth Date: _____ Occupation: _____

Employer: _____

Employer's Address: _____

NRA#: _____ Expiration Date: _____

Sponsored by (Full Club Member): _____

Club Member's Signature: _____

Relationship to Applicant: _____ Length of Relationship: _____

Two Other References (If Not Endorsed by a Club Member)

1) Name: _____ Telephone #: _____

2) Name: _____ Telephone #: _____

Last Name

APPLICATION OF: _____
(First) (Middle) (Last)

Type of Shooting Interested In: _____

Other pertinent data for the membership the applicant may wish to present: _____

INSTRUCTIONS:

- 1) Enclose the signed application along with the background check form, supporting documents, and payment of \$195.00**
- 2) You have 45 days from receipt of this request to have payment and supporting documents returned to WGC**
(\$20.00 non-refundable application fee plus \$175.00 towards dues). If the application is accepted, a prorated share of the dues will be applied towards Full Membership status when all other requirements are completed. Dues will be refunded if application is not accepted. Full refunds may be requested within 30 days of application processing. Refunds after 30 days are at the discretion of WGC, no refunds will be given after six months.

- 3) Mail Application to: WINNEQUAH GUN CLUB or email to: memberdir@winnequahgunclub.org
Membership
P.O. BOX 296
Lodi, WI 53555

***** (FOR EXECUTIVE COMMITTEE'S USE ONLY) *****

FOR CANDIDATE MEMBERSHIP

Application Received: (Date): _____ Post marked : _____
APPLICATION FEE Received: (Date): _____ (Check#): _____
NRA Membership or Application Verified: (Date): _____
Background Check (Date): _____
Action of Executive Committee: (Date): _____
Applicant Notified of Committee's Action: (Date): _____

REQUIREMENTS FOR CONVERSION TO FULL MEMBERSHIP

Meetings Attended: (2-4 Min.)

(1st Date): _____ (2nd Date): _____ (3rd Date): _____ (4th Date): _____

Required Work Hours or Income Producing Event: Sponsored candidate 12 hours min. Non sponsored 32 hours min.

(1st Date): _____ (2nd Date): _____ (3rd Date): _____

Action by Executive Committee: (Date): _____ Action by Full Members: (Date): _____

Full Membership Fees Paid: (Date): _____ (Check #): _____

On-Site Review of Indoor Range Facilities & Rules Completed (Date): _____

On-Site Review of Outdoor Range Facilities & Rules Completed (Date): _____