

NRA MEMBERSHIP VERIFICATION

COMPLETE THIS FORM FIRST!

Thank you for your interest in joining the Arnold Rifle & Pistol Club, Inc.

The ARPC is an NRA Gold Medal Club®, meaning that 100% of our membership are members of the NRA. One benefit of this designation is that we receive a better rate on insurance for our club, which saves members money in the long run.

You may already be an NRA member. If so, simply **bring the address box from a recent issue of your NRA magazine** when you come in to apply for membership. NOTE: Many NRA membership cards don't show the expiration date.

If you are not an NRA member, you must take care of joining before you come in, in order to expedite the application process.

It's very easy to do - here's how:

1. Call the NRA and sign up: **1-877-672-2000**

(Use our Club Recruiter number to receive a \$10 discount: XC016808)

2. While speaking to the NRA, you must *ask them** for two important items, your:

- Membership Number

- Expiration Date

****They will not give you this information unless you ask for it, and you cannot get this info if you sign up online!***

Record these items in the spaces designated on the application form, complete the remainder of the application and mail it as instructed on the Membership Page at www.arnoldgunclub.org/membership

Applications are accepted by U.S. Mail or in person at regular Members Meetings held at the Arnold VFW Post on the **second Thursday of every even numbered month** at 7:30 pm, or by prior arrangement with the Membership Officer.



ARNOLD RIFLE & PISTOL CLUB, INC

8343 METROPOLITAN BOULEVARD

BARNHART, MO 63012-2304

(636) 475-5900 (Announcements & Voicemail Only)



DEP	<input type="checkbox"/>
WA	<input type="checkbox"/>
PROXY	<input type="checkbox"/>
CARD	<input type="checkbox"/>
DNA	<input type="checkbox"/>

APPLICATION FOR INDIVIDUAL MEMBERSHIP

OFFICE USE ONLY

CLUB MEMBERSHIP/ID NUMBER [] [] [] [] [] [] [] [] [] [] [] [] [] []	KEY CARD # [] [] [] [] [] [] [] [] [] []	BG/CK: MEMBER EXP:	KEY NUMBER [] [] [] [] [] [] [] [] [] []
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PLEASE CLEARLY PRINT ALL INFORMATION

MO/DAY/YR APPLICATION DATE	[] [] / [] [] / [] []
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NAME		LAST		FIRST		M.I.	
ADDRESS		NUMBER		STREET or R.R.		<input type="checkbox"/> APT#	
CITY STATE ZIP		CITY		STATE		ZIP + 4	
PHONE NUMBERS		HOME		<input type="checkbox"/> WORK		<input type="checkbox"/> CELL	
OCCUPATION		MM/DD/YY		DATE OF BIRTH:			
E-MAIL							
YOU MUST BE A MEMBER OF THE NRA BEFORE YOUR APPLICATION IS ACCEPTED				MEETING ATTENDED		VERIFIED (INITIAL)	
NRA MEMBERSHIP #		MO/YR EXPIRES		<input type="checkbox"/> LIFE MEMBER		DATE:	

By signing below I certify that all information given on this form is true and that I will abide by all rules, regulations and bylaws of the Arnold Rifle and Pistol Club, Inc.

X _____
APPLICANT'S SIGNATURE

IMPORTANT! I have read and signed / declined (CHECK ONE) the proxy form on the reverse of this application.

VEHICLE LICENSE PLATE (Primary)		VEHICLE LICENSE PLATE (Secondary)	
STATE	NUMBER	STATE	NUMBER

REFERRING CURRENT MEMBER (SPONSOR)

LAST NAME		FIRST NAME		CLUB ID#	
[] [] [] [] [] [] [] [] [] [] [] [] [] []	[] [] [] [] [] [] [] [] [] [] [] [] [] []	[] [] [] [] [] [] [] [] [] [] [] [] [] []	[] [] [] [] [] [] [] [] [] [] [] [] [] []	[] [] [] [] [] [] [] [] [] [] [] [] [] []	[] [] [] [] [] [] [] [] [] [] [] [] [] []

STAFF: ATTACH PAYMENT HERE

OFFICE USE ONLY

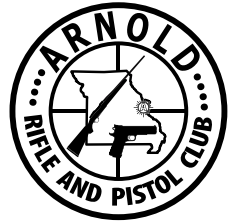
Club Work Time of 16 hours/year required.
Work time must be completed by 12/31 of the year prior to NEW MEMBERSHIP YEAR.

OFFICE USE ONLY

MEMBERSHIP STAFF SIGNATURE

INDIVIDUAL MEMBERSHIP DUES PAID		[] [] [] [] [] [] [] [] [] [] [] [] [] []
INITIATION FEE PAID		[] [] [] [] [] [] [] [] [] [] [] [] [] []
CREDIT/DEBIT: <input type="checkbox"/> MC <input type="checkbox"/> VISA <input type="checkbox"/> DISCOVER _____		[] [] [] [] [] [] [] [] [] [] [] [] [] []
CASH <input type="checkbox"/> CHECK NO. _____		[] [] [] [] [] [] [] [] [] [] [] [] [] []
TOTAL PAID		[] [] [] [] [] [] [] [] [] [] [] [] [] []
DATE		[] [] [] [] [] [] [] [] [] [] [] [] [] []

Appointment of Proxy



I, the undersigned, _____
PRINT NAME (First, MI, Last)

of _____
PRINT FULL ADDRESS - STREET, CITY STATE ZIP CODE

Member ID Number: _____, being a current member in good standing of the Arnold Rifle and Pistol Club, Inc. a 501(c)(7) Missouri Corporation, do hereby appoint the Board of Directors of the Arnold Rifle and Pistol Club, Inc. of Barnhart, Missouri as my proxy to attend meetings of the membership of said corporation to be held between the date hereof and Decem-ber 31, 2021 or any continuation or adjournment thereof, with full power to vote and act for me in the same manner and extent that I could if I were personally present at said meeting. My proxy shall have full power of substitution and revocation.

The Board of Directors of the Arnold Rifle and Pistol Club, Inc. may vote my proxy in accordance with the majority vote of said Board on matters requiring membership approval.

Signed this _____ day of _____ .
DAY MONTH, YEAR

Signature _____

OFFICE USE ONLY	
Database Entered	<input type="text"/>
Filed	<input type="text"/>

What is the Purpose of This Proxy?

A proxy is a person or group appointed to act for another. Using proxies satisfies the requirement to establish a quorum in a meeting and/or permit one person to represent another on all voting matters concerning the Club. When this proxy is signed, it will be counted toward the total number of attendees at a Membership Meeting to establish a quorum and the Executive Board may vote your proxy according to the majority vote of the Board. A vote by a proxy holder is just as effective as the owner of record. The proxy holder holds the power to decide the outcome of the proxy vote unless given specific written direction on the proxy itself. Also the proxy giver holds the right to terminate the proxy at any time. Signing this form is completely voluntary and is not a requirement of membership.

2020 MEMBERSHIP INTEREST SURVEY ••• Please complete to help us better serve you. Thanks!

Please check all programs in which you have an interest or *wish to receive emails about*:

- | | | |
|---|---------------------------------------|--|
| <input type="checkbox"/> .22 Silhouette | <input type="checkbox"/> IDPA | Youth Programs |
| <input type="checkbox"/> Archery | <input type="checkbox"/> IPSC | <input type="checkbox"/> Junior Shooters (Basic Marksmanship) |
| <input type="checkbox"/> Black Powder | <input type="checkbox"/> Steel Plates | <input type="checkbox"/> SCTP (Scholastic Clay Target Program) |
| <input type="checkbox"/> Bullseye/Indoor Pistol | <input type="checkbox"/> Five-Stand | <input type="checkbox"/> SPP (Scholastic Pistol Program) |
| <input type="checkbox"/> CMP | <input type="checkbox"/> Skeet | <input type="checkbox"/> SRP (Scholastic Rifle Program) |
| <input type="checkbox"/> Cowboy | <input type="checkbox"/> Trap | <input type="checkbox"/> YHEC (Youth Hunter Ed Challenge) |
| <input type="checkbox"/> Hunter Rifle | | |

Please check all training/classes in which you have an interest or might attend if offered this year:

- | | | |
|---|---|---|
| <input type="checkbox"/> Basic Pistol | <input type="checkbox"/> Muzzleloading | <input type="checkbox"/> Refuse to Be a Victim® Seminar |
| <input type="checkbox"/> Basic Rifle | <input type="checkbox"/> Reloading - Metallic Cartridge | <input type="checkbox"/> Home Firearms Safety |
| <input type="checkbox"/> Basic Shotgun | <input type="checkbox"/> Reloading - Shotshell | <input type="checkbox"/> Range Safety Officer |
| <input type="checkbox"/> Pistol Instructor | <input type="checkbox"/> Concealed Carry (CCW) | Other: _____ |
| <input type="checkbox"/> Rifle Instructor | <input type="checkbox"/> Personal Protection Inside the Home | _____ |
| <input type="checkbox"/> Shotgun Instructor | <input type="checkbox"/> Personal Protection Outside the Home | _____ |

Please check any of these skills, expertise or background experience you possess that could be used as part of **YOUR Club Volunteer Hours**:

NRA Certified Instructor in: _____

Other Training Certifications: _____

- | | | |
|---|---|-------------------------------------|
| <input type="checkbox"/> Carpentry | <input type="checkbox"/> Graphic Design | Other: _____ |
| <input type="checkbox"/> Painting | <input type="checkbox"/> Photography | _____ |
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Web Development | _____ |
| <input type="checkbox"/> Plumbing | <input type="checkbox"/> Writing (Newsletter/Web Content) | |
| <input type="checkbox"/> Equipment Operator (Tractor, etc.) | <input type="checkbox"/> Computer Networking/Maintenance | |
| <input type="checkbox"/> General Labor | <input type="checkbox"/> Accounting/Finance | <input type="checkbox"/> Data Entry |