

SST Club Membership Application/Renewal

Date: _____

- | | |
|--|--|
| <input type="checkbox"/> Regular Member | <input type="checkbox"/> Renewal (2010) (\$100) |
| <input type="checkbox"/> New (Jan-Mar) (\$100) | <input type="checkbox"/> New (Jul-Sept) (\$50) |
| <input type="checkbox"/> New (Apr-Jun) (\$75) | <input type="checkbox"/> New (Oct-Dec) (\$25) |
| <input type="checkbox"/> Life Member (\$1500 may be paid in up to 6 installments) | |



New member dues are prorated based on when the application is made, as shown above.

All memberships are due for renewal by January 1 of the coming year.

Prorated dues apply to new regular membership applications *only*, not to renewals

Please print CLEARLY using a black pen.

Name: _____

Address: _____

City, State, Zip: _____

Home Phone: _____

Work Phone: _____

Email Address: _____

- Please email me announcements of club activities. I am a member of the NRA

Emergency Contact: _____

Phone: _____

Family members needing membership cards (Must be dependents on your IRS Form):

Spouse: _____

Children: _____

Spouses and dependents (IRS guidelines) shoot at member rates and may purchase punch cards and components. They do not have voting rights in club matters.

Send this application and check to: **SST Club**
26520 292nd Ave SE #3
Ravensdale, WA 98051-8633

----- CLUB USE ONLY BELOW THIS LINE -----

PAID BY: CASH CHECK JOINED: AT CLUB BY MAIL

CARD ISSUED BY: _____ DATE: _____