

MARION ROAD GUN CLUB, INC.
Office: 788 Walnut St. (Suite 3)
Mailing Address: P.O. Box # 777, Macon, GA., 31202-0777
Telephone# (478) 743-8734
NRA Affiliation # B-4539 GSSA Affiliation # 5257

MEMBERSHIP APPLICATION

Prior to attending the mandatory orientation session, applicants must provide:

1. A completed application form
2. A signed consent form for background check
3. A copy of your state or government-issued photo ID
4. A non-refundable orientation fee of \$20.00.
5. Full payment of applicable dues (cash or check).

NOTES

Items 2, 3 and 4 above do not apply to Junior applicants.

Completed applications and payments may be mailed to the P.O. Box above or hand-carried to the office between 9AM and 4pm on Tuesdays and Wednesdays (office closed all other days).

During the orientation, an ID card photo will be taken and a temporary ID card issued. After clearing a criminal background check, the applicant will be sent a welcome package and photo ID card. The orientation lasts approximately 45 minutes.

Refund of dues (minus \$20.00 orientation fee) will be made if an applicant is not accepted for membership for any reason.

Additional information may be obtained from our website www.marionroad.com or by calling the office number listed above.

APPLICATION FOR MEMBERSHIP

Indicate type of membership for which application is being made.
Dues do not include non-refundable \$20 orientation fee.

ADULT MEMBERSHIP OPTIONS

Must be 18 years of age or older at time of application.

_____ **REGULAR ADULT: \$80.00 for current year only--expires 31 December.**

_____ **PRORATED ADULT: \$6.67 x number of FULL months left in current year, plus \$80.00 for upcoming year. Expires 31 December of following year.**

SENIOR MEMBERSHIP OPTIONS

Must be 65 years of age or older at time of application.

_____ **REGULAR SENIOR: \$50.00 for current year only--expires 31 December.**

_____ **PRORATED SENIOR: \$4.17 x number of FULL months left in current year, plus \$50.00 for upcoming year. Expires 31 December of following year. See example above for explanation.**

JUNIOR MEMBERSHIPS

Juniors must be at least 7 years old and not more than 17 years of age at time of application.

_____ **JUNIOR MEMBERSHIP: \$20.00 annually (per Junior). Pro-rating not available.**

Junior Memberships will only be issued to Juniors whose Parent or Legal Guardian is an **Adult Member**, and the Junior Member will not be allowed on the range without being in the immediate vicinity of his Member Parent or Guardian who will exert direct supervision over the Junior Member at all times while on the range. Any infraction of this rule will be grounds for dismissal of the Parent or Guardian Member as well as the Junior Member from the club, with forfeiture of dues paid.

APPLICANT INFORMATION FORM
Please Print Legibly

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

Mailing Address: _____
(Street Address)
_____, _____, _____
(City) (State) (Zip Code)

Telephone Number: (_____) - _____ **DOB:** _____
(Area Code) (Number) (Mm/dd/yyyy)

Valid Email Address: _____

Are you a member of the N.R.A.? **ES** _____ **NO** _____

If so, what is your membership type: _____ **Member #** _____

JUNIOR MEMBERSHIP INFORMATION

#1	_____	_____	DOB: _____
	(Last Name)	(First Name)	(Mm/dd/yyyy)
#2	_____	_____	DOB: _____
	(Last Name)	(First Name)	(Mm/dd/yyyy)
#3	_____	_____	DOB: _____
	(Last Name)	(First Name)	(Mm/dd/yyyy)
#4	_____	_____	DOB: _____
	(Last Name)	(First Name)	(Mm/dd/yyyy)

The following certifications are required of all adult applicants. Read them carefully and if you can truthfully make these certifications, sign and date them.

+++++

CERTIFICATION

I hereby certify that I am a Citizen of the United States of America and that I have not been dishonorably discharged from the Armed Forces thereof, and that I am not on parole from the judicial system, and that I meet all of the legal obligations and laws, both Federal and State, for the possession of firearms, and further that I have never been convicted of a crime of violence, or been committed to a mental institution by the courts, and that I am not awaiting trial in the courts and have no outstanding warrants for my arrest in the United States of America and that I am not a member of any organization that has, as one of its purposes, the overthrow of the Government of the United States of America. I hereby certify that if I am granted Membership in the Marion Road Gun Club, Inc. that I will abide by the Constitution and By-Laws thereof, and will comply with all of the Safety Rules of the club, and that I hereby waive any and all rights to obtain legal redress of any and all grievances and/or claims that I might otherwise pursue relative to any injuries that I and/or my property might sustain while on the premises, or in route to the premises, or in returning to my abode from the premises. This Waiver and Discharge is effective against claims against any or all members and officers of The Marion Road Gun Club, and also, against the Owner or Owners of the property on which the range is located. However, in so doing, I reserve the right to seek legal redress against any individual who may have done injury to me or my property directly.

EXECUTED this _____ day of _____, A.D. _____

I so certify: _____
(Legal Signature) (Date)

Witness: _____
(Legal Signature) (Date)

**Georgia Bureau of Investigation
Georgia Crime Information Center**

Consent Form for State Wide Check

I hereby authorize the Macon Police Department Central Records Unit to receive any Georgia criminal history record information pertaining to me, which may be in the files of any state or local criminal justice agency in Georgia.

Full Name (print)

Address		Telephone Number	
M/F	Race	Date of Birth	Social Security Number

Please mark the appropriate type of identification presented

Drivers License

Other Government-Issued Photo ID – Specify _____

Special Employment provisions (check if applicable):

Employment with mentally disabled (Purpose code 'M')

Employment with elder care (Purpose code 'N')

Employment with children (Purpose code 'W')

I _____ give Marion Road Gun Club, Inc. permission
(Signature of Individual giving consent)

to receive the results of my Criminal History Record Check.

Date Signed