



# Littleton Sportsman Club

P O. Box 1037  
Littleton, MA 01460

## Membership Application

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

Phone: Home: \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail: \_\_\_\_\_

Membership Type (*select one*): \_\_\_ \$125 Single \_\_\_ \$200 Family

\_\_\_ NRA Member Membership Number: \_\_\_\_\_

\_\_\_ GOAL Member Membership Number: \_\_\_\_\_

Massachusetts Gun License(s): \_\_\_ LTC A \_\_\_ LTC B \_\_\_ FID

Membership in other shooting clubs (past and present): \_\_\_\_\_

Reason for joining the club: \_\_\_\_\_

I acknowledge that I have read and understand the club rules and agree to be bound by them while on club property.

Applicant: \_\_\_\_\_ Witness: \_\_\_\_\_ Date: \_\_\_\_\_

### **CLUB USE ONLY**

Referred by: \_\_\_\_\_ Date accepted: \_\_\_\_\_

Method of payment: \_\_\_\_\_ Amount Paid: \_\_\_\_\_ \_\_\_ Prorated

Provided copy of rules: \_\_\_\_\_ Qualified on indoor range: \_\_\_\_\_

Provided with keys: \_\_\_ Gate/Club House \_\_\_ Indoor Range