

OLD SARATOGA MUZZLE LOADING CLUB, INC
PO BOX 204
MECHANICVILLE NY 12118
osmlcsecretary@gmail.com

PLEASE ENCLOSE A SELF-ADDRESSED, STAMPED ENVELOPE FOR RETURN OF YOUR MEMBERSHIP CARD

MEMBERSHIP APPLICATION

January 1 – December 31, _____

____ New Member
____ Renewal - Last Membership Year _____

Changes in contact info? Yes / No

Name _____ Phone () _____
Last First Middle Initial

Address _____ Birthdate _____

City _____ State _____ Zip _____

E-mail address _____

NMLRA Member Number _____ Expires _____

Driver's License Number _____ State _____

MEMBERSHIPS AVAILABLE – Circle one

Individual – Dues \$35

Family - Dues \$45 (Limited to spouse and children of member UNDER AGE 18 and living at same address)

Spouse's name _____

Child's name _____ Birth date _____

Child's name _____ Birth date _____

Child's name _____ Birth date _____

This is to signify that I have read the OSMLC Rules and Safety Regulations on the back of this Application and agree to abide by the same. I also understand that I am joining the OSMLC to participate in the Club's black powder shooting events and activities.

Signature _____ Date _____

First-time Applicants Only:

Sponsor's Name _____ OSMLC Member

Names of other sporting clubs or organizations that you belong to _____

What guns do you own that you plan to use at OSMLC events? _____

Write a short paragraph describing why you wish to join the OSMLC: _____

First-time Applicants are subject to approval of the Board of Directors

Club Use Only:

Date Card Issued _____

Date Computer Entered _____