

# South River GUN CLUB

SOUTH RIVER GUN CLUB, INC.

5205 Highway 212 N  
Covington, GA 30016

gunclubmanager1@gmail.com

## Membership Application

NAME: \_\_\_\_\_

SPOUSE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ OFFICE PHONE: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_ EMPLOYER: \_\_\_\_\_

EMAIL ADDRESS (REQUIRED): \_\_\_\_\_

CURRENT NRA NUMBER (REQUIRED): \_\_\_\_\_

I have read, understand, and agree to comply with the General & Range Rules of the South River Gun Club, Inc. I certify that I am a Citizen of the United States; that I am a current member of the National Rifle Association; that I am not a member of any organization which has as any part of its program the attempt to overthrow the government of the United States by force or violence; that I have never been convicted of a crime of violence; and that, if admitted to membership, I will fulfill the Club's commitment to good sportsmanship and good citizenship.

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

DUES (FULL OR PRO-RATED): \_\_\_\_\_ \$348 + \$10 (Gate Access Card)

NEW MEMBER SERVICE FEE: \_\_\_\_\_ \$500 (Non-Refundable)

TOTAL AMOUNT ENCLOSED: \_\_\_\_\_ \$858