

High Rock Shooting Association, Inc.

Application for Membership

Date Received: _____ Date Accepted: _____

Membership #: _____

Please complete this application, signed as indicated by yourself. Incomplete or illegible forms will not be accepted. This Association is a 100% NRA Affiliated Club and you are required to be a member of the National Rifle Association. If you are not currently an NRA member, the Association can provide you with an application at the time of your proposal. Your HRSA, Inc. membership application shall be complete upon receipt of your NRA membership number. Submission of this application does not constitute membership until accepted by a vote of the membership. You must be present at the meeting when your application is submitted to the Board of Directors for review and to the membership to vote on acceptance.

First: _____ M.I. _____ Last _____
 Address: _____
 City: _____ State: _____ Zip: _____
 How long at this address: _____ years _____ months
 Birth Date: _____ Place of Birth: _____
 Current Home Phone: _____
 Current Cell Phone: _____
 Current Work Phone : _____ Ext: _____
 E-mail Address: _____
 U.S. Citizen: Yes No Date if Naturalized: _____
 Occupation: _____
 Current Employer: _____ _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Supervisor's Name: _____
 Date Started: _____

Member of the National Rifle Association
 Yes No
 Membership # _____
 Annual 3 Yr. 5 Yr. Life Other
Other Organizational Memberships


 Pistol Permit: Yes No Exp: _____
 Pistol Permit # _____
 Driver's License # _____
 F.F.L. Yes No Exp: _____
 F.F.L. #: _____

I certify that (1) I am neither under indictment for, nor have I been convicted of, a crime punishable by imprisonment for a term exceeding one year; (2) I am not an unlawful user of, nor addicted to, nor have I been convicted of, a crime or restricted by imprisonment for a term exceeding one year; (3) I am not a fugitive from justice; (4) I have not been adjudicated **mentally** defective and I have never been committed to a mental institution; (5) I have not been discharged from the Armed Forces of the United States under dishonorable conditions; (6) I am not an alien illegally in the United States; and (7) I am not a person, who having been a citizen of the United States, has renounced one's citizenship.

I, the undersigned, hereby authorize HRSA, Inc. to inquire of any and all present and previous employers, Public or Government Officials or Agencies, or any other persons regarding my experience with firearms, reputation and/or character and agree to hold all such persons and/or HRSA, Inc. harmless with respect to any information they may give, hereby releasing them from any liability arising therefore. I understand that any information obtained by HRSA, Inc. shall be kept within the organization and may only be used in the determination as to my suitability as a member of the Association.

Applicant's Signature: X _____ Date: _____

Secretary Use Only

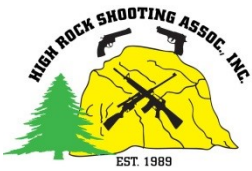
Interview Date: _____
 Acceptance Date: _____
 Membership #: _____

Monies Received

Rec. Date: _____
 Processing Fee: \$ _____
 Check# / Cash: _____
 Annual Dues: _____
 Check# / Cash: _____
 1st. Dues Period Ending _____

Reviewed by Board of Directors

Dir: x _____
 Dir: x _____
 Dir: x _____
 Report Attached: Yes No
 Favorable Non-Favorable

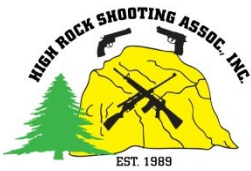


New Member Applicant Basic Requirements

1. You must be a current member of the **National Rifle Association (NRA)** – if you are not an NRA member, you can join the NRA at a reduced cost through HRSA.
2. You will be required to perform **2** range duty shifts per calendar quarter. Saturdays have two shifts and Sundays have one.
3. You will be required to attend **AT LEAST 8** regular meetings each calendar year. Meetings are held on the first Wednesday of each month.
4. Your participation will be mandatory for an additional **10** hours in your first year of membership in a variety of club events such as Range Clean Up Day, Women on Target and other range improvement projects.
5. A non-refundable fee of **\$150.00** is required for consideration of your membership application. (\$75.00 Application Fee and \$75.00 CT background check fee) This is to be paid at the time of your interview with the Executive Committee.
6. Once accepted into probationary membership, you will then pay your first year's **membership dues of \$50.00.**
7. Your membership is **probationary** for the first **Twelve** months. You must complete the following four elements during you're the first four months probationary period **or your membership will be revoked:**
 1. Complete your Range Officer training (at which time you will receive your range box key).
 2. Cover an additional **2** shifts of range duty.
 3. Complete the first **4** hours of your 10 hours of additional service to HRSA.
 4. Attend at least **3** of the four regular monthly meetings.

Signed _____

Dated _____



HRSA New Member Application Process

1. Be **interviewed** by HRSA Board of Directors. Board will decide whether or not to accept the application and fees at this time.
2. Attend next monthly meeting where you will be asked at the end of the proceedings to introduce yourself to the membership for consideration.

After your introduction, the membership (not including guests) discusses your application and votes on your acceptance.

You will be notified immediately as to the results of the membership vote.

4. If accepted into membership, you will be scheduled for your Range Officer training. We will also provide a copy of our by-laws and annual Range Officer training material.

The date of your initiation into the Club begins your 12 month probationary period during which time you will meet your new member requirements at outlined in your letter of expectation or you will be removed from the club's membership.

5. The HRSA Secretary and Range Duty Enforcement Officer will monitor your progress toward meeting your New Member obligations and sign off upon their completion, at which time you will become a Full (non-probationary) HRSA member.