

NWMACA APPLICATION FOR NEW MEMBER

Northwest Montana Arms Collectors Association
PO Box 653
Kalispell, MT 59903

***Please check box for preferred mode of formal communications**

Name _____ Name _____
Primary applicant Spousal applicant

* Street/PO _____ City _____ ST _____ Zip _____

Phone # _____ Phone # _____

* Email 1 _____ Email 2 _____

Annual membership dues (* 1 and 2 below prorated by the month):

- 1. Member* \$ 175.00
- 2. NRA member* \$ 130.00 Type _____ Num. _____
- Spousal member \$ 20.00 Show name of primary member above
- Instructor \$ 20.00 NRA, USCCA, 4-H or Hunter Safety
- Non-shooting member \$ 20.00

Dues paid _____ [] cash [] check # _____

Door Code (primary) _____ Door Code (spousal) _____ Key card available upon request.

Door code will be phoned / emailed according to mode of communications selected above.

Annual memberships expire on Dec 31. Code will be disabled on Jan 15 if membership is not renewed.

Applicant agrees that person named above...

- ...MUST be on-site with all guests.
- ...May not loan out key code or key card.
- ...Is responsible to make certain all safety devices are used.

AFFIDAVIT: The undersigned agrees that he/she understands the federal and state requirements necessary to purchase a firearm, and that he/she would pass the background check necessary to purchase a firearm. The undersigned agrees that without their signature below their door code will not be activated.

Signed – Primary member _____ Date _____ Printed name _____

Signed – Spousal member _____ Date _____ Printed name _____

Bring this form and your payment when you take your tour

Gerald Hill, Director and Past President: (406) 755-6057
David Mosby, President: (406) 471-0972
Ezra "Bubba" Gray, Secretary: (406) 212-1563
Gerald Hanson, Treasurer: (406)-897-2989

Initials of person giving tour: _____