



Kern Shooting Sports
P.O.Box 161
Bakersfield, CA 93302

MEMBERSHIP APPLICATION

Kern Shooting Sports

P.O. Box 161
Bakersfield, CA 93302-0161

Applicant's Information

Name: _____

Home Phone (____) _____ Work Phone (____) _____ E-mail: _____

Address: _____

City

State

Zip

Date of Birth (Required for KSS affiliation with CMP) ____/____/____

Memberships:

Primary (Voting) Member Dues: \$35.00/yr

Name: _____

Associate Member (Spouse): \$10.00/yr

Name: _____

Junior Member (Under 18): \$5.00 (Included in Junior Program fee)

Name: _____

Annual Memberships Expire on January 31

REQUIRED INFORMATION for PRIMARY MEMBERSHIP:

NRA Membership #: _____ Expiration Date: ____/____

Check (Type of NRA Membership)

Annual Adult 3-Year Adult Senior Life Other _____

The NRA Pledge:

I pledge that I am a citizen of good repute of The United States of America; that I am not a member of any organization or group having as its purposes the overthrowing by force or violence the Government of the United States or any of its political subdivisions; that I have never been convicted of a crime of violence; and that admitted to membership, I will fulfill the obligations of good sportsmanship and good citizenship.

Signature: _____