

Alliance Rifle Club

P.O. Box 992

Alliance, NE 69301

The Undersigned applies for membership in Alliance Rifle Club:

	Name:			
	Address:			
	Email:			
	Employer:			
	Birth Date:	Phone Number:		
NRA Number: What is your state of residence:		Life or Annual Expiration Date: (Circle One)		
what is you	ir state of residence:			
	Please answer yes of	no to the following	questions:	
Are you under indictment of information in any court for a felony, or any other crime for which the judge could imprison you for more than a year?				
Have you been convicted in any court of a felony, or any other crime, for which the judge could have imprisoned you for more than one year, even if you received a shorter sentence including probation?				
Are you a fug	gitive from justice?			
•	ınlawful user of, or addicted to, ı g, or any other controlled substa		essant, stimulant, or	
Have you ever been adjudicated mentally defective (which includes having been adjudicated incompetent to manage your own affairs) or have you ever been committed to a mental institution?				
Have you been discharged for the Armed Forces under dishonorable conditions?				
	ect to a court order restraining y an intimate partner or child of		lking, or threatening	
Have you bee	en convicted in any court of a m	isdemeanor crime of do	mestic violence?	
Have you eve	er renounced your United State	citizenship?		
Are you an a	lien illegally in the United States	3?		
applic	manent Member of the Alliance Feant for membership, have witne elieve that he or she will be a goo	ssed him or her answer		r her
Date	Signature of Ap	plicant	Sponsor Signature	_