PUULOA RIFLE AND PISTOL CLUB
P. O. BOX 10471
HONOLULU, HI 96816

Type of Action: ___ New Membership Application
___ Membership Renewal
___ Civilian Waiting List

Rank: _____ Name: _____
(Last) (First) (M.I.)

Address: _____
(Number, Street) (City) (State) (Zip)

E-Mail: _____

Work Phone: _____ Home Phone: _____ Cell Phone: _____

NRA Member Yes / No Member #_____ Date of Birth: _____

SERVICE COMPONENT (CHECK ONE)

____ USMC ____ USA ____ USN ____ USAF ____ USCG

____ CIVILIAN ____ DOD CIVILIAN

SERVICE STATUS

____ ACTIVE ____ RESERVE ____ NATIONAL GUARD ____ RETIRED

Military Unit assigned to (for military and DOD): _____

Proof of Military Status (ID, DD214): Verified BY_____

Dues:		
	Regular Member (Military)	$20 Per Year
	Associate Member (Civ & DOD)	$20 Per Year
	Military Dependents *	$15 Per Year
	Junior Member	$15 Per Year

(*) If sponsor is a member.

Make checks payable to Puuloa Rifle and Pistol Club and mail to the address at the top of this form.
For club use only: Membership expiration date: _____