

Please send this form to the NSCA with your dues payment of \$100.00.

CLUB/ASSOCIATION APPLICATION

FOR SPORTING CLAYS YEAR ______ January 1 – December 31, _____ Club Number: _____

| PLEASE REVIEW ALL INFORMATION CAREFULLY. FILL IN THE BLANK AREAS AND/OR MARK ANY NECESSARY | | | | | | | | | | | |
|---|-------------|-------|--|---------|--------------|---|------|----------------|-------------|--|--|
| Club Physical Address (Shows on Web) | | | | | | Club Shipping Address (UPS, FedEx or Common Carriers) | | | | | |
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| | | | | | | | | | | | |
| Club Mailing Address | | | | | | Club E-Mail Address | | | | | |
| Clob Mailing Address | | | | | | | Club | L-Mail Address | | | |
| | | | | | | | | | | | |
| | | | | | Club Website | | | | | | |
| | | | | | | | | | | | |
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| | | | | | | | | | | | |
| | | | | | | | | | | | |
| Days and Times | | on | | | | | | | | | |
| Club Telephone Club Fax | | | | | | | | | | | |
| Club directions as it appears in our records: Mark through and write any changes (500 characters max) | | | | | | | | | | | |
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| | | | | | | | | | | | |
| Number of | Sporting C | Clays | | 5-Stand | | | | Camper/RV | | | |
| each: | Skeet Field | ds | | Trap | | | | Rifle/Pistol | | | |
| Please Indicate Primary Contact Person | | | | | | | | | | | |
| Position | Primary? | Name | | | | Day No. | | Evening No. | Fax No | | |
| Manager | | | | | | | | | | | |
| | | | | | | E-Mail | | | | | |
| Chairman | | | | | | | | | | | |
| | | | | | | E-Mail | | 1 | | | |
| President | | | | | | E 14. 11 | | | | | |
| Socratary | | | | | | E-Mail | | I | | | |
| Secretary Treasurer | | | | | | E-Mail | | | | | |
| | | | | | | L-Mail | | | | | |