

SALEM RIFLE AND PISTOL CLUB

Membership Application

NAME (print): MARK Cain Date of Birth: 3/29/71

Address: 5299 SYCAMORE Rd

Preferred Phone: 304 641-1355 Email: MARKSKIPPY71@gmail

Shooting Interests: All NRA # (if member): _____

NRA Certified Instructor: Yes ___ No If so, discipline: _____

Special Skills (e.g., carpenter, mechanic, welder, etc): _____

JACK OF ALL TRADES

1. I hereby apply for membership to the Salem Rifle and Pistol Club.
2. I certify that I am not prohibited by state or federal law from owning or possessing firearms.
3. By making this application I understand and agree that, if selected:
 - a. I am responsible for reading, understanding, and applying relevant portions of the Standard Operating Procedures (SOP) Manual. Violation of safety or security provisions of the SOPs may be grounds for dismissal.
 - b. I am responsible for the actions of the guests I sponsor.
 - c. I am expected to participate - to the extent I am able - in club activities, including meetings, work, shooting, and social events.
 - d. I am subject to a possible background investigation.
4. I CERTIFY that I am a citizen of good repute of the United States of America; that I am not a member of any organization having as its purpose or one of its purposes the overthrow by force and violence of 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, if admitted to membership, I will fulfill the obligations of good sportsmanship and good citizenship.

1/5/25
Date

Mark Cain
Signature of Applicant

Tina Bailey
Printed Name of Nominating Member

Tina L Bailey
Signature of Nominating Member

Return to: Tina L Bailey
112 Water St
Salem, WV 26426

NOTE: Memberships are only considered in early February of each year with the decisions of the Executive Committee announced in mid/late February.