

**JOINING**

1. I wish to become a member of the Wayland Rod & Gun Club, Inc. I understand that I am expected to serve on at least one committee and to abide by the Range Rules and By-laws of the Club at all times.

2. I can best serve the Club in the following capacity (i.e., attending work parties, performing a service such as carpentry, serving on a committee).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**APPLICANT PLEASE READ, SIGN AND DATE WHERE INDICATED**

I hereby certify that all of the questions on this application have been answered truthfully and to the best of my knowledge and ability.

Signature:

\_\_\_\_\_

Date:

\_\_\_\_\_

**APPLICATION PROCESS**

Prospective members must meet with the Membership Committee. The Committee reserves the right to phone or write the Chief of Police of the applicant's city or town.

**APPLICATION FEE**

\$100.00 non-refundable

**APPLICANT PLEASE SIGN BELOW**

Signature:

\_\_\_\_\_

**APPLICABLE DUES:**

- Family            \$160.00
- Individual        \$100.00
- Senior             \$ 60.00
- Junior              \$ 50.00
- Associate         \$ 20.00

**CLUB OFFICER PLEASE NOTE:**

Check Amount: \_\_\_\_\_

Cash Amount: \_\_\_\_\_

Received by: \_\_\_\_\_

Date Received: \_\_\_\_\_



**WAYLAND ROD & GUN CLUB, INC.**

\_\_\_\_\_

4 MeadowView Road  
Wayland MA 01778  
508-877-2108



**FIREARMS INFORMATION**

FID #: \_\_\_\_\_

Pistol Permit # \_\_\_\_\_

Permit Expires: \_\_\_\_\_

NRA Member: \_\_\_\_ Yes \_\_\_\_ No

Are you a member of any State Rifle or Pistol Association? If yes please list address and phone.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you a member of any other rod and gun club? If yes, please list address and phone.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SPORTS INTERESTS**

Rifle/Caliber \_\_\_\_\_

Shotgun/Gauge \_\_\_\_\_

Pistol/Caliber \_\_\_\_\_

Trap Shooting \_\_\_\_\_

Archery \_\_\_\_\_

Hunting \_\_\_\_\_

Muzzleloading \_\_\_\_\_

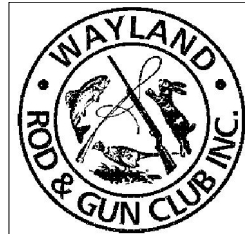
Reloading:

- Rifle  Shotgun  Pistol3

Fishing

- Fresh Water  Salt Water

- Own Boat  Rent Boat



**PERSONAL**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Line of Work: \_\_\_\_\_

Do you have a police record?

- Yes  No

Has your driver's license ever been suspended or revoked?

- Yes  No

If yes, has your right to operate a motor vehicle been restored?

- Yes  No