

**Mississippi State Firearms Owners Association**  
**Application for Membership**

ID \_\_\_\_\_  
Paid by \_\_\_\_\_  
Check # \_\_\_\_\_  
Amount \_\_\_\_\_  
Date \_\_\_\_\_

Fill out completely, (Please type or print clearly )

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ COUNTY \_\_\_\_\_  
STATE: \_\_\_\_\_ \*ZIP CODE: \_\_\_\_\_  
PHONE NO.: (\_\_\_\_\_) \_\_\_\_\_ NRA MEMBER NO.: \_\_\_\_\_ (required)  
E-MAIL: \_\_\_\_\_  
Referring Member or Club: (Print Name) \_\_\_\_\_

**FIREARM RELATED INTERESTS: Check all that apply:**

Competition Shooting, \_\_\_\_\_ Casual Shooting/Plinking \_\_\_\_\_ Hunting \_\_\_\_\_  
Firearm Safety/Training \_\_\_\_\_

If Competition Shooting was check, Check all that apply:

Handgun \_\_\_\_\_ Rifle \_\_\_\_\_ Shotgun \_\_\_\_\_

Other firearm interests: \_\_\_\_\_

**WILL YOU BE WILLING TO HELP WITH ANY OF THE FOLLOWING?**

Help organize and work at matches: Yes \_\_\_\_\_ No \_\_\_\_\_  
Work on a Committee: Yes \_\_\_\_\_ No \_\_\_\_\_  
Help with Junior Programs: Yes \_\_\_\_\_ No \_\_\_\_\_

Do you want to receive Legislative emails. Yes \_\_\_\_\_ No \_\_\_\_\_

**TYPE OF MEMBERSHIP:** ( Please check New Or Renewing and Type , If you have been a member before you are a renewing member. )

NEW MEMBER \_\_\_\_\_ RENEWING MEMBER \_\_\_\_\_ Member # \_\_\_\_\_

Individual :	One Year \$15.00 _____	Shooting Club	\$50.00 _____
	Five Year \$60.00 _____	Hunting Club	\$25.00 _____
	Life \$150.00 _____	Corporate	Blue \$25.00 _____
	Junior: \$5.00 _____		Silver \$50.00 _____
Youth Organization:	\$15.00 _____		Gold \$100.00 _____

By my signature below, I agree to comply with the policies and by-laws of MSFOA, and certify that :

I am a citizen of the United States of America.

I have never been convicted of a felony.

I am not a member of any organization or group having as its purpose, or one of its purposes, the overthrow of the Government of the USA or any of its political subdivisions.

The above information and statements are true and correct.

Applicant Signature: \_\_\_\_\_

A copy of MSFOA by-laws and policies are available upon written request.

**MAIL THIS APPLICATION** along with a check or money order (payable to M.S.F.O.A.) to:

**MS State Firearm Owners Association**  
**Attn: Deborah Withers, 430 Withers Lane, Woodville, MS 39669**