



JOIN THE CALIFORNIA RANGEMASTERS ASSOCIATION



MEMBERSHIP APPLICATION

NAME: _____
PLEASE PRINT

AGENCY: _____

TITLE/RANK: _____

AGENCY ADDRESS: _____

HOME ADDRESS: _____

TELEPHONE: _____ **E MAIL:** _____

Please mail all CRA correspondence to: Work Home

NRA MEMBER: YES NO **MEMBER #:** _____

Endorsement of Applicants Direct Firearms Supervisor: I know the applicant to be professionally engaged in Firearms Instruction (active) or know him/her to be a law abiding citizen who has knowledge that would benefit firearms training (associate) and recommend him/her for membership in the California Rangemasters Association

SUPERVISORS NAME: _____ **TITLE:** _____
Please Print

CONTACT TELEPHONE: _____ **DATE:** _____

APPLICANTS SIGNATURE: _____ **DATE:** _____

CLASSIFICATION REQUESTED: ACTIVE ASSOCIATE HONORARY

DUES: \$35.00 (First year). \$30.00 annual renewal due January 1 each year.

PLEASE ATTACH A LIST OF CLASSES ATTENDED, CERTIFICATES HELD AND SPECIALTIES

- Do you have a range available to you to provide training? YES NO
- Do you have a classroom available to you to provide training? YES NO
- Are you willing to assist the CRA with monthly training to members? YES NO

CRA office use only

Accepted: Rejected: Dues paid: Date: _____ Approved By: _____

Mail to: California Rangemasters Association
1317 North San Fernando Blvd., #211
Burbank, California 91504