

# MERLIN MARAUDERS

## Cowboy Action Shooting Posse

### Membership Application & Renewal Form

**PRINT CLEARLY**

MEMBER NAME \_\_\_\_\_ DATE \_\_\_\_\_

ALIAS \_\_\_\_\_ SASS # \_\_\_\_\_ RO I  RO II

SECOND ADULT (SPOUSE) \_\_\_\_\_

ALIAS \_\_\_\_\_ SASS # \_\_\_\_\_ RO I  RO II

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ -- \_\_\_\_\_

PHONE (541 ) or ( ) \_\_\_\_\_ Work/Cell (541 ) or ( ) \_\_\_\_\_

E-mail address (1) \_\_\_\_\_

E-mail address (2) \_\_\_\_\_

Family Member \_\_\_\_\_ ALIAS \_\_\_\_\_ SASS # \_\_\_\_\_

Family Member \_\_\_\_\_ ALIAS \_\_\_\_\_ SASS # \_\_\_\_\_

MEMBER BIRTHDAY \_\_\_\_ / \_\_\_\_ / \_\_\_\_ SPOUSE BIRTHDAY \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Day Mo. Day Mo.

Membership: Single \_\_\_\_ (\$25.00) Family\* \_\_\_\_ (\$35.00)

*\*Family Membership requires that persons live at the same residence.*

EMERGENCY CONTACT PERSON \_\_\_\_\_

EMERGENCY CONTACT PHONE (541) or ( ) \_\_\_\_\_

MEMBER OF JCSA? (✓) \_\_\_\_\_ MEMBER OF NRA? (✓) \_\_\_\_\_

Tell something about yourself in 25 words or less: (Past clubs, interests, military service, where you lived, etc.)

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(Continue on Backside)

**PLEASE MAIL MEMBERSHIP APPLICATION FORM AND ANNUAL DUES,  
(\$25.00 FOR SINGLE MEMBERSHIP, OR \$35.00 FOR FAMILY MEMBERSHIP)**

**TO:**  
**MERLIN MARAUDERS**      **Make check payable to Merlin Marauders**  
**P.O. BOX 202**  
**GRANTS PASS, OR 97528**