CLUB MEMBERSHIP
Application/renewal

CLUB MEMBERSHIP

☐ **Club Regular** – *$50 or $5/member, whichever is greater*

Number of members : _____

NFA LIABILITY INSURANCE

☐ $12.95/ person covered/year *($5 million coverage)*

_____ people covered X $12.95 = $ _____

Please attach a list of all club member's first and last names.

CLUB INFORMATION

NFA Club Membership ID : _____

Club Name : _____

Club Contact : _____

Address: _____

City: _____

Province: _____ Postal Code: _____

Phone: _____ Fax: _____

Email: _____

Website : _____

DONATION *(Optional)*

Yes! I/we would like to make a donation to the NFA in the amount of : $_____

PAYMENT INFORMATION

Total Payment: $_____ ☐ Cheque or Money Order (enclosed) ☐ Visa ☐ Mastercard ☐ AMEX

Card Number: _____ Name on card: _____

Exp. date: M M / Y Y CVV Code *(3 digits on back of card)* : _____ Signature: _____

MAIL TO: Canada's National Firearms Association – P.O. Box 49090, Edmonton, Alberta T6E 6H4