KansasRifle.org

KANSAS STATE RIFLE ASSOCIATION

MEMBERSHIP APPLICATION

Complete entire form (please print). Mail with check or money order to: ***PO Box 8760, Topeka, KS 66608***

Name _____ **Date of Birth** _____

Address _____

City _____ **State** _____ **Zip** _____

Phone _____ **Phone Type** *(circle)* **Mobile / Landline**

Email *(to receive your membership card, website access, and other essential communications)*

_____

New or renewing member? *(circle)* **New / Renewing** **Member Number** *(if known)* _____

Please list any current memberships in other Second Amendment organizations *(circle)*

National Rifle Association	**Gun Owners of America**
Second Amendment Foundation	**National Shooting Sports Foundation**
other	

Do you belong to a gun club? *(circle)* **Yes / No**

Name of Club _____

Location _____ **State** _____

Are you a veteran? *(circle)* **Yes / No** **Are you a law enforcement officer?** *(circle)* **Yes / No**

Occupation *(Required if you are including a PAC donation)* _____

CHOOSE FROM THE FOLLOWING MEMBERSHIP OPTIONS:

✓	MEMBERSHIP TYPE	DUES
	Individual | 1 Year	**$ 25**
	Individual | 3 Year	**$ 60**
	Family | 1 Year	**$ 35**
	Junior | 1 Year	**$ 7**
	Life Membership	**$ 400**
	Total Membership Dues	**$**
	Additional Donation to the KSRA PAC	**$**
	Additional Donation to the KSRA Foundation	**$**
	Total Amount Included	**$**

Scan the code or visit **KansasRifle.org/join** for additional options!

Additional membership options and payment plans available: KansasRifle.org/join

Support your KSRA by purchasing a *Don't Tread on Me* License Plate: KansasRifle.org/plate

All information will become the property of the Kansas State Rifle Association. The KSRA will not sell your information to any third party entity.

PAID FOR BY THE KANSAS STATE RIFLE ASSOCIATION PAC; TRAVIS COUTURE-LOVELADY, CHAIRMAN

Info@KansasRifle.org (913) 608-1910 PO Box 8760, Topeka, KS 66608

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