

Membership questions s/b  
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**NWMACA MEMBERSHIP RENEWAL**  
Northwest Montana Arms Collectors Association  
PO Box 653  
Kalispell, MT 59903

Name \_\_\_\_\_ Name \_\_\_\_\_  
Primary member Spousal member

Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

Primary Spouse  
Phone \_\_\_\_\_ Phone \_\_\_\_\_

Primary Spouse  
Email \_\_\_\_\_ Email \_\_\_\_\_

Preferred form of formal communication (check one) Thank you for saving us the cost of snail mail.  
Email USPS

**Check all that are a part of this application**

- \$175 Regular shooting membership Basic membership
  - \$130 NRA shooting membership Current member of National Rifle Assoc.
  - \$130 FVA shooting membership Current member of Flathead Valley Archers
  - \$100 Group shooting membership
- Group Name \_\_\_\_\_ Door code activated as soon as 5 group shooting members have paid.
- Minimum of 5 Group shooting members
- \$ 20 Spousal shooting membership Spouse of primary member – has door code
  - \$ 20 Instructor shooting membership Currently certified with NRA, USCAA, 4-H, FWP Hunter Educ.
  - \$ 20 Limited Membership - # of apps attached \_\_\_\_\_. Blank form on next page

Dues paid \_\_\_\_\_ [ ] cash [ ] check # \_\_\_\_\_

Annual memberships expire on Dec 31. Door code will be disabled on Jan 15 if membership is not renewed. Your existing door code will continue be used if payment is received after Jan 15.

**AFFIDAVIT:** The undersigned

- agrees purchase \$20 limited membership\* for all family members or guests who also use the range
- agrees not to loan out key pad code or key card
- agrees to follow all posted Range Rules
- knows Limited Membership is good for this calendar year. No access unless accompanied by full member
- understands the federal and state requirements necessary to purchase a firearm and would pass the background check necessary to purchase a firearm

\_\_\_\_\_  
Signed-Primary member Date Printed name

\_\_\_\_\_  
Signed-Spousal member Date Printed name

# NWMACA APPLICATION FOR LIMITED MEMBERSHIP

Northwest Montana Arms Collectors Association  
PO Box 653  
Kalispell, MT 59903

**All family members and guests using the range who do not have a full membership must purchase a Limited Membership.**

Name \_\_\_\_\_ Date \_\_\_\_\_

Street/PO \_\_\_\_\_

City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

Phone # \_\_\_\_\_

Email \_\_\_\_\_

## **\$20 per Calendar year membership**

Please place your application and payment in the locking mailbox on the inside wall by the front door, or mail it to our PO Box shown above.

Your membership allows limited access to the shooting range as long as you are accompanied by a full member. Your membership will terminate at the end of the current calendar year. If you choose to become a full member with unlimited rights to use the range, your \$15 fee for this application may be applied as a reduction to the New Member fee.

Applicant agrees to follow all posted range rules.

\_\_\_\_\_  
Signed

\_\_\_\_\_  
Date

***FYI – This membership has been created so that you are covered by our General Liability Insurance Medical Payments clause..***