

St. Lawrence Long Rifles Muzzle Loading Club

**301 County Route 53
Brasher Falls, NY 13613
stlawrencelrsec@gmail.com**

PLEASE ENCLOSE A SELF-ADDRESSED, STAMPED ENVELOPE FOR RETURN OF YOUR MEMBERSHIP CARD

MEMBERSHIP APPLICATION

January 1 – December 31, _____

____ New Member

____ Renewal - Last Membership Year _____

Changes in contact info? Yes / No

Name _____ Phone () _____
Last First Middle Initial

Address _____ Birthdate _____

City _____ State _____ Zip _____

E-mail address _____

NMLRA Member Number _____ Expires _____

MEMBERSHIPS AVAILABLE

Individual – Dues \$5

This is to signify that I have read the SLLR Rules and Safety Regulations on the back of this Application and agree to abide by the same. I also understand that I am joining the SLLR to participate in the Club's black powder shooting events and activities.

Signature _____ Date _____



Club Use Only:

Date Card Issued _____

Date Computer Entered _____