



Braintree Rifle & Pistol Club, Inc.
PO Box 850024
Braintree, MA 02185-0024
BRP.org

MEMBERSHIP APPLICATION

Requirements For Membership

Applicants for Senior Membership must be 18 years of age or older, a citizen of the United States, possess a valid Massachusetts License to Carry a Firearm and/or a Firearm Identification Card, and be of good moral character.

Fill out application completely and in a legible manner. Application is to be turned in at the club. All prospective new members must attend an Orientation Seminar, which is held at the club and generally offered once a month on a Sunday morning. Prior to the scheduled Orientation Seminar, the applicant shall be required to show proof of a valid Massachusetts License to Carry a Firearm or Firearm Identification Card. The initiation fee and dues will be paid on the day of the class. You will be notified by phone or by mail when you have been scheduled for the New Members Class. You must attend the class to be a member.

PLEASE PRINT

Last Name _____
 First Name _____
 MI _____
 Address _____ City _____ Zip _____
 Tel. Home _____ Business _____
 Sex _____ Marital Status _____ Email Address _____

**Reviewed by Member of
 Membership Committee or Executive Board**

Reviewed By _____ Date _____
 Attended Members Class on _____ Date _____
 Dues \$ _____ Rec'd By _____ Badge# _____

Mass FID _____ Expires _____
 Massachusetts License to Carry a Firearm _____ Expires _____
 Checked by _____ Date _____

How long have you lived at above address? _____

Previous Address: _____

Occupation: _____

Employed by _____ How Long? _____

Address of employer: _____

Previous employer within past five years : _____

Previous employer address _____

Are you a member of the NRA? Yes or No _____ Member Number: _____



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List all Organizations of which you are or have been a member: _____

Have you ever been suspended or expelled from any club? Yes or No _____

If so, what for? _____

Have you ever been a defendant in criminal court action? Yes or No _____

If so, for what reason(s) _____

Have you ever been arrested? Yes or No _____

If so, for what reason(s) _____

Date of offense: _____ Outcome of any court action _____

How long have you handled Firearms? _____

Do you have any physical or mental defects? Yes or No _____

If yes, please specify: _____

Are you a U.S. Citizen? Yes or No _____

Have you had any military service? Yes or No _____ Branch of Service _____

Dates of service, from: _____ to _____ Type of discharge _____

References: (List three. Club Members preferred, no relatives.)

Name _____ Address _____ Tel# _____

Name _____ Address _____ Tel# _____

Name _____ Address _____ Tel# _____

The facts set forth in my application for membership in the Braintree Rifle & Pistol Club Inc. are true and complete. I understand that if I falsify any of the above statements on this application, it is sufficient cause for denial of membership or dismissal.

Signature of Senior Member Applicant _____ Date _____