Danbury Shooting Sports Association, Inc. POB 7145, Wilton, Connecticut, 06897

MEMBERSHIP APPLICATION - 2017

Must be filled out completely and **LEGIBLY**

Name :	Phone :
Address:	
City: St	zip
Occupation	Date of Birth
Where Employed	How Long
Have you ever been convicted of a felony ?	Yes No
Email address:	
Please list two(2) personal References:	
Name	Phone
Name	Phone
Drivers license: CT N.Y Other	Number
Connecticut Pistol Permit: Yes No	Number
Are you an NRA member? Yes No	<u> </u>
DSSA Member $Endorsement(optional)$:	
I hereby submit my application for membership in	n DSSA. If elected to membership, I will
comply with all rules and by-laws of said organiza	tion. Enclosed is my application
fee of \$150.00 (\$65.00 for Youth(14-17) / \$35.0	
8 Hours of volunteer service per member is reques	ted per season
	s/Alterations
Instructor Range Officer _	Other
Signed	Date
This application does not guarantee membership.	False statements are grounds for
dismissal. If this application is rejected, all applic	ation fees will be refunded.
DSSA Investigating Committee Report:	
Application & ID checked by:	Mombor #