



MEMBERSHIP APPLICATION

Name: _____ Date of Birth: _____

Address: _____

City/Province: _____ Postal Code: _____

Phone: _____ Email: _____

PAL #: _____ PAL Expiry: _____ PAL Type: _____

Type of Membership:

_____ **Anytime Membership- This membership allows you unlimited use of the range anytime that we are open. Retail value- \$600.00**

_____ **Anytime Monthly Membership- This membership allows you unlimited use of the range anytime that we are open with the convenience of monthly payments. Retail value- \$54.00 monthly**

_____ **Weekday Membership- This membership allows you unlimited use of the range on weekdays from Opening-4pm. Retail value- \$400.00**

_____ **Weekday Monthly Memberships- This membership allows you unlimited use of the range on weekdays from Opening-4pm. Retail value- \$38.00 monthly**

_____ **Affiliate Memberships- This membership meets the RCMP requirements. Retail value- \$70.00**

I hereby acknowledge that the information I have provided is true and accurate to the best of my knowledge. I have read and agree to follow all regulations and policies of Straight Shooters Indoor Range Inc. I understand that failing to follow the regulations and policies could result in my membership being revoked and shooting privileges being cancelled. I acknowledge and understand that my membership can be terminated after 72 hours if my monthly credit card payment is declined.

Signature: _____ Date: _____

Membership #: _____

Approved by: _____

**STRAIGHT SHOOTERS
INDOOR RANGE**