



**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 \_\_\_\_\_  
 Middle \_\_\_\_\_  
 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 \_\_\_\_\_