Fiscal Year July 2024 – June 2025 New Membership Application for Minneapolis-Richfield American Legion Post 435 Gun Club

PLEASE PRINT ALL INFORMATION AS NEATLY AS POSSIBLE

Last Name _____ First Name _____ MI _____

Street _____ City _____ State _____ ZIP _____

Home Phone _____ E-mail _____

Occupation _____ Date of Birth _____

❒ I am interested in joining the Civilian Marksmanship Program Club (CMP)
❒ I am an Archer / Bow Hunter

Check Your Top 2 Shooting Interests:
❒ Rifle ❒ Trap/Skeet ❒ Pistol

Check One of Each:
❒ I WISH TO JOIN, or: ❒ I AM ALREADY A MEMBER OF
❒ POST 435 ❒ SQUAD 435 SAL ❒ POST 435 AUX

Legion Membership #
New Members Write "NEW" ➔

I wish to transfer from Post # ➔
Must Complete and Sign AL Member Data Form

If you are a current American Legion Post member and do not remember your NINE DIGIT membership number, please contact: American Legion and Sons of the American Legion: Call (317) 630-1200, Auxiliary: Call (317) 569-4500

Choose Your Correct **NEW LEGION** Member Type ➔➔➔ ↓ Write Your **TWO** Required Checks ↓	**NEW Legion** ↓	**NEW SAL** ↓	**NEW Auxiliary** ↓
Total Check to **"American Legion Post 435"**	$55.00	$30.00	$40.00
Total Check to **"Post 435 Gun Club"**	$223.00	$223.00	$223.00
Total Dues and Fees	$278.00	$253.00	$263.00

Gun Club fee includes a one-time $75.00 initiation fee and Minnesota sales tax

Work Requirement: If you are under 68 years of age you must satisfy the Club's 4-hour work requirement. If you do not wish to work you may pay a $120 fee instead. You must either work for 4 hours or pay the $30/hr fee before you will be allowed to renew your membership for the next year.

ORIENTATION NOTICE

Post 435 Gun Club Rule 8.0 requires all new members to attend an orientation meeting prior to being issued their gate card and being granted membership privileges and access to the ranges. If you are a new American Legion member, you must also complete an American Legion, Sons of the American Legion or Legion Auxiliary membership application. Your orientation meeting must be scheduled with the Membership Officer.

"ACCEPTANCE OF MEMBERSHIP AND ACKNOWLEDGEMENT OF TERMS AND CONDITIONS"

I understand and I will abide by the Club Bylaws, Range Rules and the Club Calendar provided to me. I certify that I am eligible for membership in the Richfield American Legion Post 435, Auxiliary, or SAL. I have enclosed payment for my membership according to the Fee Schedule, above. I UNDERSTAND THAT FAILURE TO RENEW MY MEMBERSHIP BY August **1, 2025** WILL RESULT IN THE FORFIETURE OF MY GUN CLUB MEMBERSHIP. I UNDERSTAND THAT MY GUN CLUB GATE CARD WILL BE DEACTIVATED AND THAT ENTERING THE GUN CLUB OR LEGION GROUNDS WILL BE CONSIDERED TRESPASSING AND APPROPRIATE ACTION WILL BE TAKEN.

REQUIRED SIGNATURE ➔ _____ **Date** _____

PLEASE E-MAIL YOUR SIGNED APPLICATION TO membership@post435gunclub.org. You will be required to provide proof of membership eligibility (current membership in American Legion Post 435, SAL Squad 4345, or Post 435 Auxiliary or a membership application) and dues payment(s) at your orientation.

NOTE: The membership year is from July 1st to June 30th. It does not follow the calendar year.

THIS SPACE FOR OFFICE USE ONLY

GATE CARD #_____ ***POSTMARK/JOIN DATE***_____

Gun Club Check #_____ ***Post 435 Check #***_____