

VIRGINIA GUN COLLECTORS ASSOC. , INC.

MEMBERSHIP APPLICATION

PLEASE **PRINT** OR WRITE CLEARLY AND COMPLETELY. ADDRESSES AND PHONE NUMBERS WILL BE HELD BY THE BOARD AND NOT PUBLISHED TO THE PUBLIC. MAIL THE COMPLETED APPLICATION **TO**:

Larry Hare  
PO Box 210  
**Lorton** VA 22199-0210

YOUR APPLICA**TION** WILL BE PRESENTED AT THE NEXT REGULAR MEMBERSHIP **MEETING**. YOU MUST BE VOTED INTO MEMBERSHIP. EITHER YOU OR YOUR SPONSOR MUST BE PRESENT AT THE MEETING WHEN YOUR APPLICA TION IS PRESENTED TO THE MEMBERSHIP. EITHER YOU OR YOUR SPONSOR WILL KNOW WHEN YOU **HAVE** BEEN ACCEPTED OR REJECTED DUE TO THE MEMBERS' **VOTING**. IF ACCEPTED, YOU WILL BE PLACED ON THE MAILING LIST FOR MONTHLY NEWSLETTERS. DUES ARE \$20.00 A YEAR OR \$100.00 FOR LIFE MEMBERSHIP. YOU WILL BE PROVIDED A COPY OF OUR **BY LAWS** AND OUR SHOW RULES. PLEASE ATTACH YOUR CHECK FOR EITHER YEARLY OR FOR LIFE MEMBERSHIP. IN CASE YOUR APPLICATION IS REJECTED, ALL MONIES WILL BE RETURNED TO YOU. A PHOTO ID BADGE WILL BE MADE FOR **YOU AT ONE OF OUR GUN ~~SHOWS~~—MARCH OR SEPTEMBER **OF**** EACH YEAR. MEMBERSHIP MEETINGS ARE HELD AT THE NRA HDOT IN FAIRFAX VA.

Candidate's Name \_\_\_\_\_  
Home or Business Address \_\_\_\_\_  
\_\_\_\_\_ **ZIP** \_\_\_\_\_  
Telephone Home \_\_\_\_\_ Business \_\_\_\_\_  
FAX Number \_\_\_\_\_ e mail \_\_\_\_\_  
Sponsor's Name \_\_\_\_\_

If other members request your telephone number, may it be given out? Yes \_\_\_ No \_\_\_  
Are you willing to help in making calls to legislators to give them your views on **Anti** gun laws etc? Yes \_\_\_ No \_\_\_  
Are you a NRA member? No \_\_\_ Life \_\_\_ Annual \_\_\_ Benefactor \_\_\_  
Do you have a FFL or CR License Yes No (No need to provide numbers)  
What is you primary interesting in collecting firearms? \_\_\_\_\_

Do you have any other firearm related interests? \_\_\_\_\_  
How long have you been collecting firearms? \_\_\_\_\_

To what collecting organizations/shooting organizations do you belong \_\_\_\_\_

Have you authored any articles or presented programs at firearm collecting groups? Please identify them \_\_\_\_\_

By signing this application and on approval of the membership you agree to and understand the following criteria for probationary membership in the Virginia Gun Collector's Association:

1. My membership is probationary for a period of one year.
2. I am willing to assist with running VGCA sponsored gun shows in such area as: security/set up/take **down/club** displays Yes \_\_\_ No \_\_\_ If Yes, please identify the area in which you could help \_\_\_\_\_
3. I am willing to present a program to the membership at a monthly meeting sometime within my probationary year. Yes \_\_\_ No \_\_\_ If your answer is Yes, please identify the subject on which you could make a presentation \_\_\_\_\_

4. I agree to attend as many announced membership meetings as possible and to bring in items for our "show and tell" portions of the meetings. Yes \_\_\_ No \_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**THE FOLLOWING PART OF THE APPLICATION IS TO BE FILLED OUT BY THE SPONSOR. TO BE A SPONSOR, YOU MUST BE A PERMANENT ACTIVE MEMBER OF VGCA.**

1. Are you personally acquainted with the candidate Yes \_\_\_ No \_\_\_ How long \_\_\_\_\_
2. List names of VGCA members who are well enough acquainted with the candidate to be able to recommend him for membership: \_\_\_\_\_

3. Is the candidate of high moral character and does he enjoy the good will and respect of fellow collectors and associates? \_\_\_\_\_

4. In your own words why **will** this candidate become a good active member of VGCA? \_\_\_\_\_

5. Have you observed the candidate's collection \_\_\_\_\_ Your comments; \_\_\_\_\_

6. Does the candidate exhibit a ready willingness to share his knowledge with other collectors? Yes \_\_\_ No \_\_\_

Sponsor's signature \_\_\_\_\_ Date \_\_\_\_\_

FOR THE BOARD OF DIRECTORS :

The Board recommends the candidate's name be placed before the membership for a vote into membership \_\_\_\_\_

The Board does not recommend the candidate's name be placed before the membership for a vote into membership \_\_\_\_\_

Approved \_\_\_\_\_ Date \_\_\_\_\_

Not Approved \_\_\_\_\_ Date \_\_\_\_\_

Board President's signature \_\_\_\_\_ Date \_\_\_\_\_

Revised 4-04