

Membership Application

New Jersey Second Amendment Society

Last: _____ First: _____ MI: _____

Street: _____

City: _____ State: _____ Zip: _____ County: _____

Phones - Home: _____ Work: _____ Cell: _____ FAX: _____

Email Address: _____

Committees you may be interested in (check as many as apply): Bylaws Education/Training
 Executive Finance Fund raising Media/Publicity Membership Programs/Events

Please summarize any special skills or qualifications you may have that you would like to share with the club: _____

I hereby apply for membership in the New Jersey Second Amendment Society (hereafter referred to in this document as NJ2AS). In making this application, I have read, understood and agree to subscribe to the purposes and objectives of the NJ2AS as set forth in the Association bylaws, and available for review at WWW.NJ2AS.COM.

I also certify that my conduct will not be contrary to the purposes, policies or image of the NJ2AS. I agree to abide by the eligibility requirements of the NJ2AS at all times. I further agree to conduct myself in accordance with all applicable laws and in a safe and ethical manner at all meetings, activities, and other events sponsored by the NJ2AS.

I understand that if I fail to uphold the conduct becoming a law abiding citizen that I may have my membership revoked. I further understand that my membership will not be official until I have returned this completed form and my dues have been received.

Print Name: _____

Signature: _____ Date: _____

Annual Membership Dues are \$25.00. Please do not send cash. NJ2AS is a non-profit Corp. Dues and donations are NOT tax deductible. If paying by check, please make check out to NJ Second Amendment Society and mail to the following address:

New Jersey Second Amendment Society
P.O. Box 128
Manahawkin, NJ 08050