

# CORAOPOLIS DISTRICT SPORTSMEN'S ASSOCIATION

106 Coketown Road  
Coraopolis, Pa. 15108  
412-264-9920  
Web-site: www.cdsa.biz  
Incorporated 1930

Associated with:  
National Rifle Association      Allegheny County Sportsmen's League  
USA Archery                      Civilian Marksmanship Program  
PA Game Commission

## APPLICATION for MEMBERSHIP

DATE \_\_\_\_\_ BIRTH DATE: \_\_\_\_\_

NAME \_\_\_\_\_ DRIVER'S LIC. # \_\_\_\_\_

ADDRESS \_\_\_\_\_ DRIVER'S STATE \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ OCCUPATION \_\_\_\_\_

ZIP CODE: \_\_\_\_\_ NRA MEMBERSHIP # \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

EMERGENCY NAME & PHONE \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

**TYPE of MEMBERSHIP.....DUES.....FIRST YEAR INITIATION FEE**

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JUNIOR (1yr - 17yrs)	\$10.00	NONE
ADULT / FAMILY (18YRS-64yrs)	\$100.00	\$125.00 (total \$225)
SENIOR (65yrs +)	\$50.00	\$125.00 (total \$175)

MEMBERSHIP TYPE \_\_\_\_\_

**Options for payment are cash, check, money order or credit card. (\$6 surcharge if paid by credit card)**



**TAKE THIS COMPLETED FORM TO THE CDSA SAFETY ORIENTATION CLASS, AFTER YOU HAVE BEEN CALLED AND ADVISED THERE IS AN OPENING FOR MEMBERSHIP.**



**By signing below, I swear that I am, by all Federal, state, and local laws permitted to own and shoot a gun. I also understand I am responsible to provide first aid supplies for myself and my guests, CDSA is not liable for injuries occurring on-site.**

**SIGN FULL NAME:** \_\_\_\_\_

**>>>>>>>> This lower portion will be completed by the CDSA Membership Officer. <<<<<<<<<**

**New paid member's name:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Amount paid:** \_\_\_\_\_ **Membership type:** \_\_\_\_\_ **Membership number:** \_\_\_\_\_