

**CORAOPOLIS DISTRICT SPORTSMEN'S ASSOCIATION**

106 Coketown Rd. Coraopolis, PA 15108  
phone: 412-264-9920 website: [www.cdsa.biz](http://www.cdsa.biz)  
Incorporated 1929

**Membership Renewal ONLY or Information Update (not for new memberships)**

DATE: \_\_\_\_\_ BIRTH DATE(S): \_\_\_\_\_

NAME(S): \_\_\_\_\_

DRIVER'S LIC.#(S)& STATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

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

ZIP CODE: \_\_\_\_\_ NRA MEMBERSHIP # \_\_\_\_\_ (not yet a requirement)

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

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

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

( CDSA saves on postage costs, if we can email information to you, and you receive it quicker )

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**>>>>>>>>TYPE of MEMBERSHIP AND DUES<<<<<<<<<**

- JUNIOR (8yr - 17yrs) \$10.00
- ADULT(18YRS-64 yrs) \$100.00
- SENIOR (65yrs +) \$50.00
- ADULT FAMILY (18YRS-64 yrs) \$100.00
- SENIOR FAMILY (BOTH 65+) \$50.00

MEMBERSHIP TYPE \_\_\_\_\_ OLD MEMBERSHIP NUMBER: \_\_\_\_\_

Options for payment are cash, check, money order or credit card. Any questions regarding the form call Bob or Michelle 412-264-9920. Any applications and payments made after June 30th is subject to the yearly \$25.00 late fee.

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 for providing first aid supplies for myself and my guests, CDSA is not liable for injuries occurring on-site. **If Family Membership BOTH signatures are required.**

**SIGN FULL NAME(S):** \_\_\_\_\_

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

New paid member's name: \_\_\_\_\_ Date: \_\_\_\_\_

Amount paid: \_\_\_\_\_ Membership type: \_\_\_\_\_ Membership number: \_\_\_\_\_