

DATE APPLICATION WAS RECEIVED: (FOR GSA USE ONLY)	PROCESSED BY: (FOR GSA USE ONLY)	Form Revision Date: 02/25/2024
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GSA WEBSITE: [www.guilfordsportsmen.org](http://www.guilfordsportsmen.org)

**NOTICE TO APPLICANT: ALL THE INFORMATION BELOW MUST BE LEGIBLY COMPLETED OR THE APPLICATION WILL BE REJECTED. THIS APPLICATION MUST BE SUBMITTED A MINIMUM OF TWO WEEKS PRIOR TO BEING VOTED UPON. PICTURE ID'S MUST BE ATTACHED TO THIS APPLICATION ON PAGE 3. A DRIVER'S LICENSE IS REQUIRED.**

CHECK ONE: NEW APPLICATION  RE-JOIN

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_ U.S. CITIZEN: YES  NO

STREET ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_ HOW LONG: \_\_\_\_\_

E-MAIL ADDRESS: (ALL COMMUNICATIONS ARE VIA EMAIL) \_\_\_\_\_

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

OCCUPATION: \_\_\_\_\_ EMPLOYER: \_\_\_\_\_ HOW LONG: \_\_\_\_\_

MILITARY SERVICE: YES  NO  BRANCH: \_\_\_\_\_ DISCHARGE TYPE: \_\_\_\_\_

MARRIED: YES  NO  SPOUSE' NAME: \_\_\_\_\_

CHILDREN NAMES AND AGES: \_\_\_\_\_

CT. HUNTING, FISHING, TRAPPING LICENSE: YES  NO  (IF YES ATTACH A VALID COPY TO PAGE 3 OF THIS APPLICATION)

STATE OF CT CONSERVATION # FROM LICENSE: \_\_\_\_\_

HAS YOUR LICENSE EVER BEEN REVOKED OR SUSPENDED: YES  NO   
(IF YES, PLEASE ATTACH A DETAILED EXPLANATION)

DO YOU HOLD A CONNECTICUT PISTOL PERMIT? YES  NO   
(IF YES ATTACH A VALID COPY TO PAGE 3 OF THIS APPLICATION)

HAVE YOU EVER BEEN DENIED A PISTOL PERMIT OR HAD ONE SUSPENDED OR REVOKED? YES  NO   
(IF YES, PLEASE ATTACH A DETAILED EXPLANATION, INCLUDING DATES)

DO YOU POSSESS ANY TYPE OF HUNTER SAFETY OR FIREARMS OR ARCHERY TRAINING CERTIFICATES: YES  NO   
(IF YES ATTACH A VALID COPY TO PAGE 3 OF THIS APPLICATION)

HAVE YOU EVER BEEN ARRESTED FOR OTHER THAN MOTORVEHICLE INFRACTIONS: YES  NO   
(IF YES, PLEASE INCLUDE A DETAILED EXPLANATION INCLUDING DATES.)

HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES  NO   
(IF YES, PLEASE INCLUDE A DETAILED EXPLANATION INCLUDING DATES.)

HAVE YOU EVER BEEN CONVICTED IN ANY COURT OF A MISDEMEANOR CRIME OF DOMESTIC VIOLENCE? YES  NO   
(IF YES, PLEASE INCLUDE A DETAILED EXPLANATION INCLUDING DATES.)

ARE YOU SUBJECT TO A COURT ORDER RESTRAINING YOU FROM HARASSING, STALKING OR THREATENING ANOTHER PERSON INCLUDING YOUR PARENT, PARTNER OR CHILD? YES  NO   
(IF YES, PLEASE INCLUDE A DETAILED EXPLANATION INCLUDING DATES.)

ALL GSA MEMBERS MUST BE A MEMBER OF THE NATIONAL RIFLE ASSOCIATION (NRA).

ARE YOU PRESENTLY A MEMBER OF THE NATIONAL RIFLE ASSOCIATION? YES  NO   
(IF YES ATTACH A VALID COPY OF YOUR MEMBERSHIP CARD TO PAGE 3 OF THIS APPLICATION)

(IF NO, DISCOUNT NRA APPLICATIONS ARE AVAILABLE FROM THE GSA MEMBERSHIP CHAIRMAN)

LIST ANY OTHER SPORTSMEN'S ORGANIZATIONS THAT YOU CURRENTLY BELONG TO: \_\_\_\_\_

PLEASE SELECT THREE COMMITTEES THAT YOU ARE INTERESTED IN SERVING ON. GSA BY-LAWS REQUIRE EVERY MEMBER TO BE ON A COMMITTEE. PLEASE NOTE THAT THE GSA BOARD OF DIRECTORS RESERVES THE RIGHT TO ASSIGN A MEMBER TO A COMMITTEE OTHER THAN THOSE YOU HAVE SELECTED SHOULD THOSE BE FULL OR BECAUSE OF NEED.

COMMITTEE 1: \_\_\_\_\_

COMMITTEE 2: \_\_\_\_\_

COMMITTEE 3: \_\_\_\_\_

**IMPORTANT!**

IF ACCEPTED AS A MEMBER IN THE GUILFORD SPORTSMEN'S ASSOCIATION, I UNDERSTAND THAT IF I DO NOT HOLD A VALID CONNECTICUT STATE PISTOL PERMIT THAT I CANNOT LEGALLY TRANSPORT A HANDGUN TO OR FROM GSA CLUB PROPERTY. I UNDERSTAND THAT I MUST PRODUCE ANY PERMITS UPON REQUEST. I ALSO UNDERSTAND THAT ALL GSA COMMUNICATIONS TO MEMBERS ARE VIA EMAIL WITH FEW EXCEPTIONS. IF YOU DO NOT HAVE EMAIL, PLEASE PROVIDE EMAIL ADDRESS OF A CO- WORKER, RELATIVE OR FRIEND. I UNDERSTAND THAT ALL FEES MUST BE PAID IN FULL BEFORE I RECEIVE ANY CLUB KEY, ACCESS CARD, ETC. I UNDERSTAND THAT I AM ON PROBATION FOR MY FIRST YEAR. FAILURE TO ABIDE BY THE BY-LAWS OF THE GSA MAY RESULT IN DISCIPLINARY ACTION UP TO AND INCLUDING DISMISSAL FROM THE GSA. I FURTHER UNDERSTAND THAT ANY FALSE STATEMENTS ON MY MEMBERSHIP APPLICATION ARE GROUNDS FOR IMMEDIATE REJECTION OR DISMISSAL. I FURTHER UNDERSTAND THAT A BACKGROUND CHECK WILL PERFORMED ON MY APPLICATION. IN ADDITION, SHOULD MY MEMBERSHIP BE TERMINATED FOR JUST CAUSE BY THE BOARD OF DIRECTORS DURING MY ONE YEAR PROBATIONARY PERIOD FOR NEW AND RE- JOIN MEMBERS, I WILL FORFEIT ALL MONIES PAID TO THE GSA INCLUDING ANY APPLICATION AND INITIATIONFEES.

SPONSOR OR APPLICANT COMMENTS:

APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

WITNESS: \_\_\_\_\_ DATE: \_\_\_\_\_

APPLICANT'S COMMENTS: \_\_\_\_\_

GSA MEMBER SPONSOR REQUIRED SIGNATURE:

I, \_\_\_\_\_ (Print Name) \_\_\_\_\_ (Signature)

SPONSOR'S COMMENTS: \_\_\_\_\_

**FOR GSA USE ONLY**

<u>DATE OF ACCEPTANCE</u>	<u>AMOUNT PAID, DATE &amp; METHOD</u>	<u>DATE OF DENIAL &amp; REASON</u>

**Guilford Sportsmen's Association**

Required Documents from pages 1 & 2.

Please place each of these documents in the appropriate box and make a

**COLOR COPY**

Driver's License

Pistol Permit

Hunter Safety Certificate  
Firearms

Hunter Safety Certificate  
Archery

CT Hunting License

NRA Membership Card