

Northern California Practical Shooters Membership Application

Name: _____

Address: _____

Home Phone: _____

E-Mail: _____

USPSA #: _____ Open Class: _____

Limited Class: _____ Limited 10 Class: _____

Production Class: _____ Revolver Class: _____

Sponsored By: _____

Note: All new members must be sponsored by a current NCPS member.

Applicants
Signature: _____

This section to be filled out by NCPS representatives.

Dues
Collected: \$ _____ Initials: _____ Date
Collected: _____

NCPS
Database
Updated?: _____ Initials: _____ Date
Updated: _____
