

**Phillipsburg Pistol Club, Inc.**  
**P.O. Box 836 – Phillipsburg, NJ 08865 (908) 454-1232**  
**MEMBERSHIP RENEWAL APPLICATION**

**INSTRUCTIONS:**

- Use this application to apply for renewal of your PPC membership.
- All members (Primary, Spouse, & each Junior) must submit an individual application.
- The completed application and dues can dropped-off at the Club on a Thursday evening or mailed to the address above. **INCLUDE A SELF-ADDRESSED, STAMPED ENVELOPE ONLY IF YOU WANT YOUR NEW MEMBERSHIP CARD MAILED BACK TO YOU OR YOU MAY PICK IT UP AT THE CLUB.**
- **A work Party Assessment** of \$60.00 applies if the renewing member failed to attend one work party during the year.  
**\*\*Members age 70 and over or have a physical handicap are exempt from attending a work party\*\***
- Pursuant to NJS2C58-2, to permit on premises temporary transfers, a list of current members will be provided to the Superintendent of the New Jersey State Police annually.

**FEES:** (Includes 6.625% New Jersey sales tax, where applicable)

Dues for Primary Member.....	<b>\$90.00</b>
Dues for Spouse.....	<b>\$30.00</b>
Dues for Junior (ages 10 to under 21 as of January 1, 2026).....	<b>\$15.00 each</b>
Replacement Key Fob Refundable Deposit (per fob issued).....	<b>\$15.00</b>

**CHECK APPLICABLE BOXES BELOW:**

<input type="checkbox"/> Primary	<input type="checkbox"/> Spouse	<input type="checkbox"/> Junior	<input type="checkbox"/> Life	<input type="checkbox"/> Patron	<input type="checkbox"/> Exempt Work Party
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**PLEASE COMPLETE THE FOLLOWING:**

<b>Name</b> <small>(First, MI, Last, Suffix)</small>			
<b>Address</b> <small>(Street No., City, State Zip)</small>			
<b>Phone No.</b>	<small>(Home)</small>	<small>(Mobile)</small>	<b>Date of Birth</b> <small>(Month/Day/Year)</small>
<b>E-Mail</b>	<b>Work Skills</b>		

**NRA INFORMATION:**

<b>Membership Type:</b>	<input type="checkbox"/> Annual <input type="checkbox"/> Life	<b>Membership No.</b>	<b>Expiration</b> <small>(Month/Day/Year)</small>
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**FORM OF ELIGIBILITY:**

<input type="checkbox"/> NJFID	<input type="checkbox"/> CCW	<input type="checkbox"/> NICS	<input type="checkbox"/> Law Enforcement	<input type="checkbox"/> Other:
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**Eligibility Document No.:**

**Date of Work Party Attended:**

(Month/Day/Year)

<b>Applicant Signature</b>	<b>Date</b>
Your signature on this document is your attestation that you have reviewed and will abide by all club and range safety rules.	

**CLUB OFFICER USE ONLY:**

TOTAL PAID:	CHECK No.:	CASH:
<div style="border-top: 1px solid black; text-align: center; margin-top: 10px;">           Officer Name         </div>	<div style="border-top: 1px solid black; text-align: center; margin-top: 10px;">           Signature         </div>	<div style="border-top: 1px solid black; text-align: center; margin-top: 10px;">           Date         </div>
<b>Membership Level:</b> <input type="checkbox"/> Primary <input type="checkbox"/> Provisional <b>Replacement Key Fob No.:</b>		

# Phillipsburg Pistol Club – Membership Application Part Two

## **SAFETY STATEMENT**

Are you thoroughly familiar with the firearm(s) that you will be using?  Yes  No (Check One)

## **GUEST SHOOTERS' RESPONSIBILITY STATEMENT**

I \_\_\_\_\_ know my guest is familiar with their firearm(s), and I assume full responsibility for their actions. I will provide the necessary information with respect to our range procedures and safety rules. In addition, I certify that I am familiar with the use and safe handling of any firearm either I or my guest bring to the club. I further state that I will ascertain that my guest(s) is/are also fully knowledgeable regarding the safe handling and use for the firearm they will be using.

## **RELEASE STATEMENT**

I, the undersigned, fully understand that the club activity I am about to engage in is inherently dangerous and that it involves the use of firearms. As a result, I could be seriously injured or killed by my actions or the actions of others. Despite this full knowledge, I want to either join or renew my membership. I further acknowledge and understand that prolonged participation in any shooting activity could result in an unhealthy exposure to lead. I agree to hold the Phillipsburg Pistol Club, its officers and trustees, harmless in the event that I am injured or killed. In addition, I further understand that if I leave the club for any reason and do not return my key-fob within one year from the time of resignation or non-renewal, I forfeit any deposit paid.

## **JUNIOR MEMBERS BETWEEN THE AGES OF 18 AND 21**

Upon reaching the age of eighteen (18) a junior member may apply for a key fob with 365 day access to all Club facilities and come to the range and shoot by themselves providing, however, they meet and agree to all of the following:

- (1) Have attended a PPC New Member Training class or a club recognized NRA pistol/rifle course.
- (2) Agree to ONLY shoot with a rifle chambered for .22 caliber ammunition.
- (3) Agree to wear a special membership badge authorizing a junior member to shoot alone.
- (4) Must have a valid form of eligibility (see page 1 of the Membership Application).

## **ACKNOWLEDGEMENT OF RULES AND REGULATIONS**

I acknowledge that I have received, fully read, understand, accept, and agree to abide by all Club rules including safety rules. I further agree that I will adhere to these rules at all times while on club grounds and/or while representing Phillipsburg Pistol Club, Inc. in any way. I understand that failure to do so may result in disciplinary action including but not limited to termination of my membership and any subordinate memberships under my own (junior/spouse/family).

**APPLICANT:**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**WITNESS:**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date