



Hawaii Rifle Association

Membership Form

Today's Date: _____

This is a new / renewal membership

Name: _____ Birth date: _____

Spouse's Name: _____ Birth date: _____
(For joint memberships only)

Address: _____

E-mail address: _____

Phone Number: _____

Please mark the checkbox(s) to indicate which type of membership you are requesting as well as any other items for purchase.

- Life Member _____ \$500
- Annual Member (mail newsletter) _____ \$25/yr
- Annual Member (e-mail newsletter) _____ \$20/yr
- Joint Spouse Membership (mail newsletter) _____ \$30/yr
- Joint Spouse (e-mail newsletter) _____ \$25/yr
- Junior Member age 11 to 18 (e-mail newsletter) _____ \$15/yr
- Affiliate Club _____ \$25/yr
- Commercial membership _____ \$112/6mo

Multiple years of annual membership may be purchased _____ yrs

Item	Cost each	Qty.	Sum
HRA Window Sticker	\$1.00		
HRA Patches	\$4.00		

Total: _____

T-Shirts: S - XL \$12.00 each (mailed)
2XL - 3XL \$14.00 each (mailed)

Color	Size	Qty.	Sum

Total: _____

Available Colors are **Ash Gray, Navy Blue, Khaki Tan**

Write checks to:

Hawaii Rifle Association
PO Box 543
Kailua, Hawaii 96734

HRAmemberships@yahoo.com