



CHEYENNE REGULATORS, INC

MEMBERSHIP APPLICATION

www.cheyenneregulators.org



APPLICANT INFORMATION

NAME		ALIAS			
ADDRESS				DOB	
CITY		STATE		ZIP CODE	
PHONE		CELL	E-MAIL		
SASS MEMBER #		EXPIRATION DATE			
NRA MEMBER #		EXPIRATION DATE			

SPOUSE / SIGNIFICANT OTHER INFORMATION

NAME		ALIAS		DOB	
PHONE		CELL	E-MAIL		
SASS MEMBER #		EXPIRATION DATE			
NRA MEMBER #		EXPIRATION DATE			

JUNIOR INFORMATION

NAME		ALIAS		DOB	
PHONE		CELL	E-MAIL		
SASS MEMBER #		EXPIRATION DATE			
NRA MEMBER #		EXPIRATION DATE			

NAME		ALIAS		DOB	
PHONE		CELL	E-MAIL		
SASS MEMBER #		EXPIRATION DATE			
NRA MEMBER #		EXPIRATION DATE			

EMERGENCY CONTACT

NAME					
ADDRESS					
CITY		STATE		ZIP CODE	
PHONE		CELL	E-MAIL		

DUES INFORMATION

MAIN MEMBER	\$35 yr	Checks payable to: CHEYENNE REGULATORS
SPOUSE / SIGNIFICANT OTHER	\$20 yr	(must reside in same household as main member)
JUNIOR MEMBERS (under 18)	FREE	(must reside in same household as main member)

OFFICE USE ONLY

AMOUNT PAID		DATE PAID		CASH	CHECK #
M CR #		SO CR #		J CR #	

SIGNATURES

MAIN MEMBER	
SPOUSE / SO	
JUNIOR	
JUNIOR	

Return completed application to: 3904 Central Ave, Suite A #133, Cheyenne, WY. 82001
For additional information leave at message at 307- 287- 0815 THANK YOU!

