



PO Box 1504 Cody WY 82414

Membership Application

(member, spouse, & children under 22 who are full-time students)

Valid July 1 to June 30

**Return this form, your check,
and a self-addressed stamped envelope to:**

**Cody Shooting Complex
PO Box 1504
Cody WY 82414**

Name(s) member, spouse, & children under 22	
Street Address City-State-Zip	
Phone #	
e-mail	

table of prorated amounts)

Membership purchased in	Expires June 30
January	\$30
February	\$25
March	\$20
April	\$15
May	\$10
June	\$5
July	\$60
August	\$55
September	\$50
October	\$45
November	\$40
December	\$35

Application must be filled out completely and legibly.

I certify that I am not prohibited by any federal, state, or local laws from ownership of or contact with firearms.

I have read, understand, and agree to obey all range rules and regulations.

Your membership card and combination will be mailed.

Signature