Application for Membership in the

AMATEUR TRAPSHOOTING ASSOCIATION

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E-MAIL: sjohnson@shootata.com

FOR ATA USE ONLY
SR Number:
Member Number:

CHECK ONE: ☐ **NEW MEMBER** ☐ **RENEWAL** **PREVIOUS CARD #:**

PLEASE SELECT ONLY ONE MEMBERSHIP TYPE FROM BELOW

MEMBERSHIP YEAR RUNS FROM 9/1 - 8/31

ANNUAL MEMBERSHIP OPTIONS

- ☐ **$20** ONE YEAR MEMBERSHIP
- ☐ **$12** ONE YEAR YOUTH MEMBERSHIP JUNIOR or SUB-JUNIOR
- ☐ **$25** ONE YEAR AIM MEMBERSHIP *($12 YOUTH ATA MEMBERSHIP & $13 ADDITIONAL PROGRAM PARTICIPATION FEE)*

LIFE MEMBERSHIP OPTIONS

- ☐ **$500** LIFE MEMBERSHIP
- ☐ **$500** * INSTALLMENT PLAN *(See Bottom of Form for Details)*
- ☐ **$250** DISABLED VETERAN *(Must Show Proof of Status)*
- ☐ **$250** 65 YEARS & OLDER *(Payment Plan Not Applicable)*

ALL MEMBERSHIP AMOUNTS ARE IN U.S. FUNDS

☐ **IF CHANGE OF ADDRESS, Check box at left and SHOW NEW ADDRESS BELOW**

PLEASE PRINT PLAINLY BELOW

NAME
LAST NAME FIRST NAME MIDDLE INITIAL

ADDRESS

CITY STATE ZIP

BIRTH DATE MO. / DAY / YR. AGE SEX TELEPHONE ( ) E-MAIL

SIGNATURE OF APPLICANT

☐ Mastercard ☐ Visa 3 Digit Security Code *(on back of card)*: Exp. Date: ___/___/___

Card #: Signature: _____

Any irregularity of procedure present in the issuance of any membership pursuant hereto shall be grounds for terminating and revoking said membership.

Received from _____ is $ _____, which is attached for membership in the Amateur Trapshooting Association, subject to approval of the State Membership committee and The Amateur Trapshooting Association Executive Committee.

Date: ___/___/___ Signed: _____ *CASHIER OR OFFICER OF CLUB* Club Name: _____

*** INSTALLMENT PLAN:** A.T.A. life memberships may be obtained using an installment plan for those purchased beginning January 1, 2000. The plan requires $300 as an initial payment with an additional $112 due in the following 6 months. The final payment of $112 is due within the second 6-month period.
Life membership becomes effective upon receipt of final payment.

REVISED 08/11