WYOMING STATE SHOOTING ASSOCIATION
MEMBERSHIP APPLICATION

Name____

First Last

Address____

____

City State Zip

Phone Number______________________________________

E-Mail____

Individual Membership Applying For

[ ]$5, Jr. [ ] $25, Annual [ ] $40 3 years

[ ] $50 5 years [ ] $300 Patron

Club

[ ] $20 annual [ ] $50 3 yr [ ] $80 5 yr

Please print neatly {especially your e-mail address} and send with dues to

WSSA Box 942 Worland, Wy 82401