



MARLIN FIREARMS COLLECTORS ASSOCIATION, LTD.

APPLICATION FOR MEMBERSHIP

Name _____ Date _____ 20__

Mail Address _____

City _____ State _____ Zip _____

Street Address _____ Phone _____

Place of Employment _____

Address _____ Department _____

Collector of: _____

Federal Firearms License Yes ___ No ___ Local or State Dealers License Yes ___ No ___

If Dealer or Gunsmith, Give Details _____

Other Organizations That I am a Member of: _____

I certify that I am not presently under indictment for, nor have I ever been convicted of, any felony involving a crime of violence or violation of any State or Federal firearms law.

Signature of Applicant

**Mail to:
P.O. Box 491
Clay Center, Kansas
67432-0491**

Initiation Fee.....	\$ 5.00
Annual Dues	
United States.....	25.00
Canada (Must be U.S. Funds drawn on U.S. Bank).....	27.00
Overseas (Must be U.S. Funds drawn on U.S. Bank).....	34.00
(Initiation fee and first year dues required with application for membership)	

