

Bench Rest Shooters Canada

Membership Form

CONTACT INFORMATION	
Name:	_____
Address:	_____
Address:	_____
City:	_____
Postal/Zip Code:	_____
Phone:	_____
E-mail:	_____
	Prov/State: _____

Fees: \$25.00 (1 year)

New

\$45.00 (2 year)

Renewal

Date: _____

Signed: _____

Mail Form & Funds to: Paul Ross

#26 2106 50th St SE

Calgary, AB

T2B 1M7