

## Member Data Sheet



NAAGA Membership ID #:	Renewal Date:	
Name: First:	MI: Last	
Address:	City:	ST Zip:
Phone: Cell: ()	Home:()	
D.O.B.://Sex	: Race:	Glasses:
Shirt Size:Pants Size:Waist/	nseam Hat Size: Sie. 6 7/8	Shoe Size:Glove Size:
Martial Status: Anniversary	y://Ema	il:
Spouse Name: First	MI: l	Last
Address:	City:	ST Zip:
Phone: Cell:(	Home:()	<u> </u>
D.O.B.://Sex	Race:	Glasses:
<b>Emergency Contact:</b>		
Name: First	MI: Last	
Address:	City:	ST Zip:
Phone: Cell:_()	_Home:_()	Relationship:
Children: At Home (age 0-17yrs) Name: First N	II: Last	D.O.B.:/
Name: First M	II: Last	D.O.B.://
Name: First M	II: Last	D.O.B.://
		No Experience: None/Beginner/Intermediate/Advance
Firearm(s): Type:Caliber:M	ake: Mode	el:
Type:Caliber:M	lake: Mode	el:
LTC: □Yes □No State:	Issue Date:	Instructor: □Yes □No
1 <sup>st</sup> Aid/CPR: □Yes □No Exp:	Food Hand: □Yes	□No Exp:O/C: □Yes □No
Fish Lic: □Yes □No Hunt Lic	:: □Yes □No Mil/LF	EO: □Yes □No Veteran:□Yes □No