

Clip this application and mail it along with your check (made payable to "Guns Save Life.com" to GunsSaveLife.com, PO Box 51, Savoy, IL 61874. Thanks!

Become a Member of CCRA / Guns Save Life			
Name			
Address			
City	County	State	ZIP
Telephone (for urgent alerts only)		E-mail	
Are you an NRA member (if so, it may help us secure low-cost insurance)			
Yes _____ If so, member number _____			
Dues:	_____	\$30 - Annual membership	
	_____	\$60 - Two-year membership	
	_____	\$90 - Three-year membership	
Donations:	_____	Legal Defense Fund donation	
	_____	Range Acquisition Fund donation	
	_____	Burma-style Sign Fund donation	
Is this a gift membership? If so, from whom:			
Political precinct (from your voter registration card):			

As required by Illinois law, membership is open to all. We encourage anyone who supports civil rights, particularly the civil right of self-defense to join with us in our battle to retain and restore our civil rights.