

Membership Application

National Congress of Old West Shootists 4225 Fleur Dr, Suite # 207 Des Moines, IA 50231

NEW WEINDERSHIP	RENEWAL	
NAME:	ALIAS*:	
STREET:		
CITY:	STATE: ZIP:	
PHONE:	CELL PHONE:	
EMAIL:		
Please select the member	ership desired:	
Life Membership (S	\$500 - ask us about payment plans)	
Individual Member	ship (\$45.00 a year + \$13.00 for outside USA)	
Family Membershi	p (\$45.00 a year + \$15.00 for each	
additional family membe	r listed + \$13.00 for outside USA,or Life Membership p	olus
\$15.00 a year for each a	additional family member listed + \$13.00 for outside US	3A.)
Please List Additional Fa	amily Members:	
Senior Citizen (60)/Full-Time Student/Fixed Income (\$40.00 a year + \$1	3 for
outside USA)		
Junior under 18 ye	ears of age (\$20.00 a year + \$13 for outside USA)	
-	print it out and mail to the address below, or email to:	
application@ncows.org		

To send payment using PayPal click here. This will take you to the PayPal website where you can sign-up for PayPal if a first time user or login to you existing account. Once you are logged in; select the "Send Money" tab and fill in our PayPal Account e-mail which is:banker@ncows.org You can add comments about what type of membership it is. New or Renewal; Regular, Senior or Family; if Family, be sure and include the names of your family members.

NCOWS, 4225 Fleur Dr, Suite # 207, Des Moines, IA. 50231, Phone 319-277-6839