



# FORT DES MOINES RANGERS, INC. 2026 MEMBERSHIP/RENEWAL FORM



fee of \$25.00 for single or \$35.00 for family  
(Family includes self, spouse/significant other, children under 18)  
(PLEASE PRINT & ANSWER ALL ITEMS)

DATE: \_\_\_\_\_

New Member \_\_\_\_\_

NAME(S) (use back of form if needed)

Renewal \_\_\_\_\_

(1) \_\_\_\_\_ ALIAS: \_\_\_\_\_

(2) \_\_\_\_\_ ALIAS: \_\_\_\_\_

(1) SASS # \_\_\_\_\_ (2) SASS# \_\_\_\_\_

RO I \_\_\_\_\_ RO II \_\_\_\_\_ RO I \_\_\_\_\_ RO II \_\_\_\_\_

DATE OF BIRTH: (1) \_\_\_\_\_ (2) \_\_\_\_\_

ADDRESS: (street address, city, state & zip please)

\_\_\_\_\_  
\_\_\_\_\_

PHONE (with area code) \_\_\_\_\_ CELL: \_\_\_\_\_

EMERGENCY CONTACT (name & phone #) \_\_\_\_\_

\_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

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AMOUNT PAID \_\_\_\_\_ CHECK # \_\_\_\_\_

Please fill out the form above & return it with your renewal

**Fort Des Moines Rangers  
C/O Jeff Smith  
219 1<sup>st</sup> Avenue East  
Oskaloosa, IA 52577**

**MAKE CHECK PAYABLE TO: FDMR**