

North Carolina Concealed Carry Instructors Association, Inc.

The mission of the Association is to bring all licensed concealed carry instructors together, primarily those licensed in the State of North Carolina, in addition to suppliers of services, education, training, and equipment. The Association is dedicated to improving the industry's professionalism, affecting change in legislation or other governing rules and regulations when necessary, promoting a positive image of the licensed Concealed Carry Instructors profession to society, and attempting to resolve issues of concern. It shall also be a source of educational training for the professional enhancement of its members. It shall have an Annual Meeting and attempt to make that experience accessible to the broadest possible audience. The Association may initiate, present, or participate in activities and functions supporting its mission, including promoting the advantages of safely owning and utilizing firearms and personal safety training programs to the general public. This organization's goal is to allow membership to the greatest number of instructors to ensure that the Association has the strongest voice for the profession in the State of North Carolina.

Membership Categories

Active Member: Individuals and business entities holding a current North Carolina concealed carry instructor license, under North Carolina law or any successor statute, shall be eligible to become an Active Member of the Association.

Associate Member: Individuals and business entities holding similar licenses from other states, jurisdictions, or countries, including individuals in any recognized form of law enforcement or public safety, shall be eligible to become an Associate Member of the Association.

NCCCIA Membership Application: PLEASE PRINT

(One-year dues, \$50 payable to NCCCIA)

NCCCIA, P. O. Box 8293, Wilson, NC 27896

Date: _____

Name: _____

Address: _____

City: _____ State: _____

County: _____

Email: _____

Phone: _____

Company Name: _____

Instructor Number: _____ State: _____

Check One: I am applying for [] **Active Membership** [] **Associate Membership**