

SSAA SUNRAYSIA PISTOL CLUB

Established 1991

Address: P.O. Box 3107
Mildura 3502

Email pcarter@ncable.com.au

FORM 1B - APPLICATION FOR MEMBERSHIP RENEWAL OF THE SSAA SUNRAYSIA PISTOL CLUB

Membership is subject to the approval of the Chief Commissioner of Police and the Club's Executive.

FULL membership is only available to SSAA members.

JUNIOR membership is available only to SSAA members under 18 years of age.

SSAA membership number

Expiry date

I am applying to renew **FULL (\$10.00)** **JUNIOR (\$5.00)** membership

| | | | |
|-------------------------------|--|--------------------------------|--|
| Family name | | | |
| Given names | | | |
| Residential address | | | |
| Postal address | | | |
| Date of birth | | Place of birth | |
| Nationality | | Occupation | |
| Private telephone | | Business telephone | |
| Mobile telephone | | | |
| E-mail: (Mandatory) | | | |
| Handgun licence number | | Hand gun licence expiry | |

Are you, or have you been, subject to epilepsy blackouts or any similar condition affecting muscular control and co-ordination?

Yes
 No

I declare that I am not a "Prohibited Person" as defined under the Firearms Act 1996.

I declare that I will abide by the Club's constitution & rules, & fulfil the obligations of good sportsmanship.

Applicant's signature: _____ Date: ____/____/____

*This application for renewal of membership MUST BE completed and forwarded to the Club Secretary by
December 31.*

Secretary's notes: Receipt number: _____ Date ____/____/____