

SSAA Ravenshoe & District Branch

Membership Application Form

February 2011

Ravenshoe and District Sporting Shooters Association
PO Box 93
Ravenshoe Qld. 4888

Ravenshoe SSAA Branch No. Q48
NOTE: When joining SSAA Qld. specify
joining Ravenshoe branch No. Q48

To join the Handgun/Pistol section of SSAA Ravenshoe and District Branch or to begin the process of applying for a Handgun/Pistol licence requires a supplementary form to be completed.

SURNAME: _____

CHRISTIAN NAMES: _____

POSTAL ADDRESS: _____

POST CODE: _____

PHONE NUMBERS: (HOME) _____ (MOBILE) _____

(EMAIL) _____

AFFILIATION HELD: SSAA MEMBER NUMBER _____

TYPE OF MEMBERSHIP REQUESTED: *FAMILY \$35.00 SINGLE \$25.00 JUNIOR \$15.00
[RATES 2010]

* ADDITIONAL FAMILY MEMBERS MUST FILL OUT SEPARATE APPLICATION FORMS

CONDITIONS OF MEMBERSHIP:

On granting of membership, I will abide by both the Club Constitution and Rules as set from time to time by a lawfully constituted meeting. I agree that should I be convicted of a criminal offence I will immediately report it to the Committee of Management. Without explanation, Ravenshoe Shooters Club may decline membership of this applicant.

Any person making false or incomplete answers to any question on this application form may be disqualified from membership of the club.

I have read and understand the Range Standing Orders and have been provided with a copy for my own reference.

I agree to make myself familiar with the provisions of THE WEAPONS ACT 1990 and WEAPONS REGULATIONS 1996;

I agree to undergo such training and assessment as specified by the Club prior to being accepted as a member of the Club.

I declare that I have read and understood all aspects of this application.

Signature of Applicant: _____ Date: _____

Post Application form and all supporting documentation to: Ravenshoe and District Sporting Shooters Association
PO Box 93
Ravenshoe Qld. 4888

REQUIREMENTS FOR MEMBERSHIP OF RAVENSHOE AND DISTRICT SPORTING SHOOTERS CLUB:

1. COMPLETION OF APPLICATION FORM (OVER)
 2. PROVIDE PROOF THAT YOU ARE A CURRENT FINANCIAL MEMBER OF THE SPORTING SHOOTERS ASSOCIATION OF AUSTRALIA
 3. PAYMENT OF FEES
 4. APPROVAL OF MEMBERSHIP AT AN EXECUTIVE MEETING
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DATE RECEIVED: ____ / ____ / ____

RECEIVED BY: _____

MEETING DATE: ____ / ____ / ____

APPROVED / DECLINED

JOINING DATE: ____ / ____ / ____

RECEIPT NO: _____

FEES PAID ____ / ____ / ____

MEMBERSHIP NUMBER: _____