



The New South Wales Rifle Association Inc

Established 1860

PO Box 386

Maroubra NSW 2035

Ph 02 9661 4532

admin@NSWRA.com.au

NEW MEMBERSHIP APPLICATION FORM

CLUB NAME: _____

SURNAME: _____

FIRST NAME: _____ MIDDLE NAME: _____

Gender: Female / Male Date of Birth: ____/____/____

RESIDENTIAL ADDRESS: _____

POSTAL ADDRESS: _____

PHONE NUMBERS: m: _____ h: _____

EMAIL: _____

MEMBERSHIP TYPE (please circle):

Full Pensioner Service Field & Rimfire Biathlon Under21

Pensioner Card Number: _____

PRIMARY DISCIPLINE (please circle):

TR FST FO FTR Field/Rimfire Service Sporting/Hunting Biathlon

Joining Date: _____

FIREARMS LICENCE/PERMIT No: _____ Category: _____ Reason: _____

Expiry Date: _____ Occupation: _____

Applicant's Signature: _____ Date: _____

CAPTAIN'S CERTIFICATE

I certify the above named member has produced evidence of their identity and in my opinion is a fit and proper person to be entrusted with the responsibility of handling firearms.

Captain's Signature: _____ Date: _____