



# St Ives Pistol Club Membership Application

***In order for your application be considered, ALL questions must be answered fully.  
Please see the bottom of Page 3 for the procedure for submission of the form.***

## **Personal Information**

Name in full \_\_\_\_\_

Any previous names \_\_\_\_\_

Residential address \_\_\_\_\_

Post code \_\_\_\_\_

Years at this address \_\_\_\_\_

Postal address  
(if different) \_\_\_\_\_

Post code \_\_\_\_\_

Contact phone nos. Home \_\_\_\_\_ Mobile \_\_\_\_\_

Email address \_\_\_\_\_ @ \_\_\_\_\_

Birth information Birthplace \_\_\_\_\_ Birth date \_\_\_/\_\_\_/\_\_\_

Previous address \_\_\_\_\_

Post code \_\_\_\_\_

Years at that address \_\_\_\_\_

Are you an Australian citizen? YES / NO (please circle)

If NO, please give your country of citizenship \_\_\_\_\_

And please give your passport no. and class of visa \_\_\_\_\_

## **Employment Information**

Occupation \_\_\_\_\_

Employer \_\_\_\_\_

Street address \_\_\_\_\_

Post code \_\_\_\_\_

Employer phone no. \_\_\_\_\_



**Membership of Other Sporting Organisations and Dates of Membership**

*If you do not have such memberships, please enter "NONE".*

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

Are you a financial member of the SSAA? YES / NO (*please circle*)

If YES, please provide the following information:

Membership no. \_\_\_\_\_ Expiry date \_\_\_\_\_

**Firearms Licence Information**

*If you current hold any firearms licence, please provide the following information. If you do not hold a licence, please enter "N/A".*

Licence no. \_\_\_\_\_

Licence category/s \_\_\_\_\_

Licence expiry Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

**Firearms Information**

*If you are a current firearms licence holder and have firearms in your possession, please provide the following information (continue on a separate sheet if necessary). If you do not possess any firearms, please enter "NONE".*

Make	Model	Calibre	Serial no.	Registration no.
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Firearms Training**

*If you have any relevant firearms training experience which might support your application, please provide details of your training and the training provider or organisation. If you have not had such training, please enter "NONE".*

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



## **Pistol Competition Disciplines**

Please advise in which pistol disciplines you currently compete or in which you wish to compete. *If you do not compete or do not yet know in which disciplines you wish to compete, please enter "NONE".*

---

---

---

## **Character References**

*You must attach to this application form two (2) written character references from persons who have known you for at least two (2) years, who are not younger than eighteen (18) years of age and who are NOT related to you or work for you. Each reference must be addressed by the referee to "St Ives Pistol Club" (not "To whom it may concern") and provide the referee's preferred contact phone number.*

*In providing these references you consent to the Committee contacting your referees and confirm that you have obtained their consent for it to do so.*

## **Declaration**

I hereby apply for membership of St Ives Pistol Club and declare that the foregoing information is true and complete to the best of my knowledge and belief.

In making this application, I give my consent to the Committee conducting any background checks it deems necessary based on the information I have provided. I further give my consent to the Committee providing such information on the status of my membership of the Club to other non-commercial entities involved in the sport of shooting (e.g. Firearms Registry, NSWAPA) as it shall deem necessary or appropriate.

I agree to abide by the decision of the Committee in regard to my application for membership and, if successful, to comply with the Constitution and Bylaws of the Club. I agree also to ANY probationary period required by St Ives Pistol Club or by government legislation.

Signature \_\_\_\_\_

Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

## **Submitting the Completed Application**

*Please bring this completed Application Form, the written character references and a non-refundable Application Fee of \$100.00, in cash, to the Club facility at St Ives on any non-public-holiday weekend Saturday between about 12:00 and 2:00 and present the form and references to the Secretary, Duty Officer or other Committee member present. You will be given a tour of the facility, if you have not visited before, and the nature of our Training Program and the commitment required of you will be explained. We will attempt to answer any questions you might have. Then, if you wish to continue, your Application Fee will be taken and a receipt issued. This fee will reserve you one of the limited number of places in the next available intake and you will be advised of the date of the induction night. If you do not wish to continue, your application form and references will be returned to you.*



## Application for Pistol Club Membership Parental Consent Form

(for applicants between 12 and 18 years of age)

To: NSW Firearms Registry  
Locked Bag 1  
Murwillumbah NSW 2484  
Phone No: 1300 362 562  
Fax No: 02 6670 8526

### Applicant details

Full Name of Applicant: .....

Address & postcode: .....

Date of Birth: .....

Name of Club: ... **St Ives Pistol Club**.....

Club Approval Number: ... **403 899 065**.....

### Consent of Parent or Guardian

I (*print full name*) ..... being  
the parent/guardian of the above named applicant, confirm identification  
and give consent for the applicant to participate in approved target shooting  
activities conducted by the above named Club.

Signature of Parent/Guardian: ..... Date: ...../...../.....

Address: ..... Postcode: .....

Contact Phones No: (*Day*) ..... (*AH*).....