



EST. 1964

Combined Shooters Club Inc.

ABN 52 438 613 115

www.combinedshootersclub.com.au

President:

Mitch Frost

Phone / Fax 02 9267 1304

secretary@combinedshootersclub.com.au

Secretary:

Mark Chapman

Club Phone 80902491

Club No. 408646553

Pistol 403921664

Long Arms 409188061

Hunting 409188109

Collecting 409188117

PO Box 4386 North Rocks NSW 2151

Application Type: Senior - Pensioner - Junior -
Category: Pistol (H) - Target (AB) - Hunter (AB) - Collector (G) -

APPLICANT INFORMATION

Name in full * _____

Address * _____ Postcode * _____

Years living at address? _____

ID Licence Number * _____ Photo ID Number * _____

Preferred Postal Address * _____ Postcode * _____

Email* _____

Place of Birth * _____ Date Of Birth * _____

Occupation * _____

Business / Employers name (in full) * _____

Address _____ Postcode * _____

Telephone Numbers *

Business _____ Fax _____

Residential _____ Fax _____

Mobile _____ Business email _____

Firearms Licence number * _____ Expiry date * _____ Category's * _____

RMS Customer Number * _____

S.S.A.A. Membership number* _____ Expiry date * _____ Category's * _____

Membership in other sporting or fraternal organizations and dates

◆ A _____

◆ B _____

◆ C _____

References which may be checked Names, Addresses, and Phone numbers

◆ A _____

◆ B _____

◆ C _____

I hereby apply for membership in the *Combined Shooters Club Inc.* and certify that the information I have given is true, correct and complete to the best of my knowledge and the knowledge that a reasonable person would have, and agree to abide by the decision of the committee and to comply fully with the constitution and regulations of the club. I also consent to and understand that I have to be a financial member of the *Sports Shooters Association of Australia (S.S.A.A.)*. I consent to and understand that, the Combined Shooters Club Inc. Committee may release or gain information regarding myself from other relevant organisations &/or parties in relation to my application and ongoing membership.

Signature * _____

Date _____

Witness * _____

Date _____

Nominated * _____

Date _____

Full Member: **\$300.00** per Annum. Joining Fee: **\$150.00** Juniors: Half Price
 AB Hunter Only: **\$50.00** per Annum.