



Founded 1986

# Macclesfield Air Gun Club



## Membership Application Form

Chairman ..... Secretary.....

Application for Full/Junior (Under 17 years) Membership

Full Name \_\_\_\_\_ Phone \_\_\_\_\_  
 Address \_\_\_\_\_ Mobile \_\_\_\_\_  
 \_\_\_\_\_ Email \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_ DOB \_\_\_\_\_  
 Post Code \_\_\_\_\_ Occupation \_\_\_\_\_

Have you been a member of a BFTA affiliated Club before? Yes / No

If yes please give your Registration Number \_\_\_\_\_

Have you ever been convicted of any criminal offence? Yes / No

Have you ever been refused membership of another Gun Club Yes / No

If you have answered yes to either of the above questions please supply full details overleaf.

Type of membership required: Full / Junior

I confirm that the information supplied above is correct and that I am not subject to restriction by virtue of the regulations set out in section 21 of the Firearms Act 1968 (see overleaf).

Signed \_\_\_\_\_ Date \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_  
(Parent/Guardian if applicant under 17)

Membership will be granted after a satisfactory probationary period has been served.

### FOR CLUB USE ONLY

Membership granted on: \_\_\_\_\_ Fee of £ \_\_\_\_\_ Received on \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_ Club Office \_\_\_\_\_