



PINE RIVERS SHOOTING CLUB INC.

Registered Shooting Club Permit Approval No: 80000352

P.O. Box 5587 BRENDAL 4500

Membership Application

2016-2017

Section 1. Personal Details (Please print all information)

Surname: _____ Date of Birth: _____

Given Names: _____

Address: _____

City/Suburb: _____ State: _____ Postcode: _____

Contact Numbers: Home: _____ Work: _____ Mobile: _____

Email Address: _____

I have read and accept the PRSCi Drug and Alcohol Policy _____ Signature _____

Section 2. Referees PLEASE TURN OVER: Referees to complete.

Your 2 Referees MUST NOT be related to you; They MUST have known you for a period of at least 2 years and would recommend you as a member of PRSC.

1st Referee: Name: _____ 2nd Referee: Name: _____

Section 3. Eligibility to Join a Shooting Club

(NB: if you are NOT the holder of a current Firearms Licence you MUST complete an Application for a Statement of Eligibility (attached); lodge it with your local Police Station and attach approved Statement of Eligibility to this form)

Are you a current member of other shooting organizations? Yes/No

If Yes give details: _____

Do you hold current firearms licences? Yes/No

If Yes give Licence No's & Expiry Date/s: -

Applicants Signature: _____ A&B _____ Expiry _____

_____ C _____ Expiry _____

_____ H _____ Expiry _____

Date: / / Other: _____ Expiry _____

Section 4. Payment Details

Club Member \$150.00 plus Optional Donation: \$ _____
Associate Member \$100.00 attached to club member number: _____
Junior Member (under 18): \$80.00
Pensioner Member: \$100.00

Club shirts are also available for an additional \$25.00 per club shirt.

Shirt Colour: Green: Blue:

My required shirt size is: S / M / L / XL / 2XL / 3XL / 4XL

Signed: _____ Date: _____

Section 5. PAYMENT OF MEMBERSHIP FEES

Please accept my payment by: Cheque/Money Order (Attached) Cash (in person) or Direct Deposit into Suncorp Acc. 484-799 201008609 – Pine Rivers Shooting Club Inc.

My Direct Deposit has Reference Code: _____ (eg:NewSmith)
(For Reference Code Please enter the word 'New' & your Surname (or part thereof))

Signed: _____ Dated: _____



First Referee:

TO WHOM IT MAY CONCERN

RE: Membership Reference for _____

I _____ have known the above-named applicant for a period of approximately _____ years.

This period is longer than the 2 year minimum requirement and I am not related to the applicant.

I believe this person to be of character to respectfully and responsibly represent any sporting club That he/she may wish to be involved with.

I believe there to be no reason this person should be refused membership of your sporting club.

Yours sincerely,

Signature: _____ Date: ____/____/____.

Full Name: (Please Block Print) _____

Address: _____

Preferred Contact Phone Number/s: _____

Second Referee:

TO WHOM IT MAY CONCERN

RE: Membership Reference for _____

I _____ have known the above-named applicant for a period of approximately _____ years.

This period is longer than the 2 year minimum requirement and I am not related to the applicant.

I believe this person to be of character to respectfully and responsibly represent any sporting club That he/she may wish to be involved with.

I believe there to be no reason this person should be refused membership of your sporting club.

Yours sincerely,

Signature: _____ Date: ____/____/____.

Full Name: (Please Block Print) _____

Address: _____

Preferred Contact Phone Number/s: _____
