

CAIRNS TARGET SHOOTING CLUB

PO Box 980 Earlville 4870 ABN: 12 243 174 984

APPLICATION FOR MEMBERSHIP

PLEASE PRINT CLEARLY

For any enquiries contact Secretary:

by email cairns-target-shooting-club@hotmail.com

Name: _____ D.O.B. _____
Home Address: _____ Home Ph: _____
_____ Mobile: _____
Postal Address: _____ Email: _____
_____ Occupation: _____ Home Fax: _____
Employer: _____ Wk Ph: _____

Circle type of Membership

Member

Junior

(up to 18 y/o)

Licences Held: Firearms Lic. No: _____ Exp. Date: _____

Concealable Lic No: _____ Exp. Date: _____

Affiliation Held: PSQ Mem. No: _____ Exp. Date: _____

Please answer Yes or No to the following questions.

1. Have you ever been convicted of a criminal offence? ()
2. Have you ever been refused a concealable/firearm licence? ()
3. Have you ever been refused membership of a Shooting Club? ()
4. Are you a prohibited person as described in the Act? ()

If the answer to any of these questions was YES, attach full details to this form on a separate sheet of paper.

Applicant must provide:

1. Statement of Eligibility from Queensland Police Service. (If unlicensed)
2. Photocopy of Licences held. (Firearms/Concealable)
3. Copy of PSQ Card (if transferring in)
4. Proof of identity (Photographic) eg. Copy of Drivers Licence, Passport etc.
5. Two character references from persons the applicant has known for at least two years.
(Written references to include referees name, address and contact phone number)
6. Declaration detailing any current membership of other approved shooting club/s or that you are not a current member of any other approved shooting club.
7. Prospective member must arrange to attend a Club Committee meeting before membership application can be processed

I hereby make application to be admitted as a member of the Cairns Target Shooting Club. I agree to be bound by the Memorandum and Articles of Association, Bylaws and Policies of the Club and to comply with the same at all times.

I agree to make myself familiar with the provisions of Queensland Weapons Act and Weapons Regulations.

I agree to maintain a PSQ affiliation as may be required by the club to maintain PSQ affiliation for handgun competition shooting.

I agree to undergo such training and assessment as specified by the Club prior to being accepted as a member of the Club.

I agree that should I be convicted of a criminal offence I will immediately report it to the Committee of Management.

Without explanation, the Cairns Target Shooting Club may decline membership of this applicant. Any person making a false or incomplete answer to any question on this application form may be disqualified from membership of this club.

I declare that I have read and understood all aspects of this application.

Proposed by: Print Name _____

Member #: _____

Seconded by: Print Name _____

Member #: _____

Signature of Applicant: _____

Date: _____

Application Form and all supporting documentation to be given to Club Secretary.