



# Chichester Rifle and Pistol Club

The Range, Wellington Road, Chichester PO19 6BB  
www.chichesterrifleclub.co.uk



## MEMBERSHIP APPLICATION FORM

(Please complete in block capitals)

Full name: \_\_\_\_\_ Title: \_\_\_\_\_

Home Address: \_\_\_\_\_

Postcode: \_\_\_\_\_ Landline: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_ Date & place of birth: \_\_\_\_\_

• How long have you lived at the above address? \_\_\_\_\_ years  
If less than one year please give your previous address: \_\_\_\_\_  
\_\_\_\_\_ Postcode: \_\_\_\_\_

- Please estimate your shooting experience **BEGINNER / INTERMEDIATE / EXPERIENCED**
- Are you interested in **PRONE / BENCHREST / S&K (3P) / LSR / AIR WEAPONS / FULL BORE**
- Are you a current member of a Rifle or Pistol Club? **YES / NO**
- Have you ever been a member of a Rifle or Pistol Club? **YES / NO**

If the answer to either of the above is yes, please give dates and name and address of Club as we will need to contact the Secretary for a reference:

Club Name: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode \_\_\_\_\_

- Are you a NSRA member? **YES / NO** Mem. No. and category: \_\_\_\_\_
- Are you a NRA member? **YES / NO** Mem. No. and category: \_\_\_\_\_
- Are you a firearm or shotgun certificate holder? **YES / NO**  
If yes, certificate number & issuing authority: \_\_\_\_\_  
Details of firearms & shotguns held: \_\_\_\_\_  
\_\_\_\_\_

• Have you ever been refused a firearm or shotgun certificate, or had one revoked? **YES / NO**  
If yes, please give reason(s): \_\_\_\_\_  
\_\_\_\_\_

• Do you know of any reason(s) why you might be refused a firearm certificate? **YES / NO**  
If yes, please give reason(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Continued..*

- If you know any full members of Chichester Rifle Club, please give their names:

\_\_\_\_\_

- Please give two referees who have known you for at least 2 years, are not related to you and who the Club may contact:

Referee 1 Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_

Postcode: \_\_\_\_\_ email: \_\_\_\_\_

Referee 2 Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_

Postcode: \_\_\_\_\_ email: \_\_\_\_\_

**I certify that the above information is correct to the best of my knowledge and, if my application is accepted, agree to abide by the rules and regulations of the Club at all times.**

**Signed by applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**If under 18, signature of parent or guardian:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Note: Any member can have their membership terminated at any time for misuse of the Club, its furnishings or equipment, for shooting at objects other than official targets, for firing guns with a calibre greater than .23 inches (0.58 mm) or for shooting other than in single shot mode. The Club Committee reserves the right to refuse membership and is under no obligation to give reasons, nor do applicants have the right of appeal.**

PLEASE RETURN THIS FORM TOGETHER WITH THE SECTION 21, GDPR AND COVID DECLARATIONS TO THE DUTY RCO OR TO THE MEMBERSHIP SECRETARY

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***For Office Use Only***

*Application Received Date:* \_\_\_\_\_ *Received By:* \_\_\_\_\_

*Forms Received (tick): Section 21* \_\_\_\_\_ *GDPR* \_\_\_\_\_ *Covid-19* \_\_\_\_\_

*Membership Subscription Due: £* \_\_\_\_\_ **PAID TO RCO / WILL PAY LATER\***

*Payment Method (tick): Cash* \_\_\_\_\_ *Cheque* \_\_\_\_\_ *Bank Transfer* \_\_\_\_\_

**JUNIOR / ADULT** \* Provisional membership **APPROVED / REFUSED\*** *Date:* \_\_\_\_\_

*Red Card Number* \_\_\_\_\_ *Issued by:* \_\_\_\_\_ *Date:* \_\_\_\_\_

\* Delete as appropriate