

## **Norfolk Air Rifle Club**

Mr/Ms/Mrs/Miss/Master/Other: First Name:	Membership No: Telephone No:
Surname: Address & Postcode:	Emergency Contact Name & Tel No:
Date of Birth: Airgun Public Liability Insurance l	Provider:Expiry Date:
(This means are you not allowed t	Section 21 bject to Section 21 of the Firearms Act 1968? YES/NO to own or use an airgun based on past criminal convictions) Club to publish images and/or video of myself on Websites at the club. YES/NO
	ve information is correct and that I am aware that any false
Signed:	Date:
<ul><li>Membership is granted at t</li><li>Membership shall be subje</li><li>Members must abide by the</li></ul>	ct to a 3 month probationary period e club rules at all times ft/lbs and no air pistol to exceed 6 ft/lbs
	Annual Rates
<ul> <li>£40* per Adult</li> <li>£0* Under 16 yrs</li> <li>Members Range fee per sho</li> <li>Guest Range fee per shoot:</li> <li>*Subject to change without</li> </ul>	
by the club for the loss or damag	sible for any injuries obtained whilst at the club. No responsibility is taken ge to members possessions however caused. Members are advised to take loss/damage to equipment. All vehicles parked on the premises are left at
I have read and fully under abide by them in full. I her	estand the rules, terms and conditions of the club and agree to eby apply for membership
Signed:	Date: