



# Grampian Air Rifle Club – Family Membership Application Form



Please print your details clearly in capital letters, using black ink.

GARC form 2

**Cost of £75 per year, plus joining fee £50. Note maximum of 2 Adults & 3 juniors/ Photos of Adults only**

**1<sup>st</sup> Adult contact for family membership:** Name.....Date of Birth.....  
Are you a holder of any Fire Arms Act Certificates Yes / No - If yes give details.....

Current AWL Number:.....Date it expires..... Do not hold a current AWL

**2<sup>nd</sup> Adult** - Name.....Date of Birth..... Current AWL Number:.....  
Date it expires..... Do not hold a current AWL

**Declaration** I declare: **1.** I am not prohibited, under Section 21 of the Firearms Act (1968) of having a firearm or ammunition in my possession. **2.** I am in compliance with the Air Weapons and Licensing (Scotland) Act 2015 in having an Air Weapon Certificate, other defined Permits / Certificates, or by exemptions stated therein. **3.** The information provided in the form is true, complete and accurate. **4.** I accept the Grampian Air Rifle Club Data Protection policy and arrangements. **5.** I will abide by all rules and regulations recorded in the Club Constitution. **6.** I agree that I have no known medical condition that does not allow me to safely carry out any aspect of the Club's activities that could endanger myself or others around me.

**1<sup>st</sup> Adult Signature:** Print Name:.....Date:.....

For official club use  
1<sup>st</sup> Adult M/S No .....  
2<sup>nd</sup> Adult M/S No.....

**2<sup>nd</sup> Adult Signature:** Print Name:.....Date:.....

**1<sup>st</sup> Junior** - Name.....Current age .....

**2<sup>nd</sup> Junior** -Name.....Current age .....

**3<sup>rd</sup> Junior** - Name.....Current age .....

For official club use 1st....  
Insert allocated 2nd.....  
m/s number 3<sup>rd</sup>.....

**Junior Member Parental/ Guardian Consent** :By signing this application form, you are consenting to your child to take part in shooting activities with the Grampian Air Rifle Club. I, being the parent/guardian of the person named above, declare: **1.** I or He/she is not subject to restriction by virtue of Section 21 of the Firearms Act 1968. **2.** The information provided in the form is true, complete and accurate. **3.** I accept the Grampian Air Rifle Club Data Protection policy and arrangements. **4.** I and he/she will abide by all rules and regulations recorded in the Club Constitution. **5.** He/she has no known medical condition that does not allow him/her to safely carry out any aspect of the Club's activities that could endanger themselves or others around them. **6. Parental/ Guardian** must accompany juniors at all times.

**Signature:** Print Name: Date:

**Personal contact Details:**  
Home Address: .....  
E-Mail..... Post Code.....  
Telephone: Home.....Mobile.....

**Next of Kin (NoK)** **Emergency Contact Details.**  
Name of NOK.....Relationship to club member.....  
Home Address:.....Post Code.....  
Telephone: Home..... Mobile.....

*Cheques made payable to Grampian air rifle Club or payable in cash to a member of the committee. Please include two passport photos of adults with names written on the back of both photos.*

For official club use	Adult 1	Adult 2	FamilyName.....
Date paid .....	First photo here	First photo here	Adult Membership No 1st...../ 2nd.....
Date action to file.....	Second to membership card	Second to membership card	Year:.....to.....
Conformation sent to member .....	For official club use only	For official club use only	

**For official club use only:** Record any adjustment to annual membership fee, subject to which quarter month is in force

Amount paid.....Plus joining fee of £50 Total paid .....Club officials name.....