



Bisley Gun Club

Membership Application Form

Name

Address

Mobile No Telephone No

Email Address.....

Date of Birth Occupation

Shotgun Certificate No Expiry Date

(Please complete a Section 21 Declaration if you do not hold a Shotgun Certificate)

Bisley Gun Club Membership No CPSA Membership No

Type of Membership **SENIOR/JUNIOR** Amount Paid

(delete where applicable)

Payment Method : **BACS/CHEQUE/CASH/CREDIT-DEBIT CARD** Date of Payment

(delete where applicable)

Membership Card: **COLLECT FROM CLUB/RECEIVE IN POST**

(delete where applicable)

Data Protection Disclosure: (Please tick the relevant boxes and sign below)

- I give my permission for Bisley Gun Club to provide my telephone number and/or email address to other Club members and/or officials if requested
- When joining Bisley Gun Club you agree that any photography taken whilst shooting and/or on the premises can be used in publicity material such as on our website or shooting press.
- I do **not** wish Bisley Gun Club to provide any of my contact details to club members or officials nor use my photographs for publicity material.

Your email and home address is private to your account. We will only use your address for communications in respect of your membership of Bisley Gun Club and will never share any of your information with third parties.

I hereby apply for membership of Bisley Gun Club.

I agree to abide by the rules of the Club as laid down in the Club Constitution.

Signed Dated

Official Use Only: New/Lapsed Members Proposed bySeconded.....