

Application for Membership

and if applicable,

Visitor Registration

(Please print clearly)

Name				Date of Birth:-
Name:-				dd / mm / yyyy
Address & postcode:-				
email:-			Phone &	01
			Mobile	07
Name & phone of emergency contact:-				
I declare that I am not prohibited from possessing firearms or ammunition by virtue of Section 21 of the Firearms Act 1968 and I agree that my data may be kept in accordance with the Club's General Data Protection Regulations Privacy Policy.				
Signed:-		Date:-		
All must complete the above section. In addition, members shall complete the section below.				
I apply for membership of the Norwich City Target Club. I have read, understand and will comply with the Club's Rules & Byelaws and will assist, as necessary, in the setting up or the clearing away of the range on my visits.				
Signed:- Date:-				Date:-
If you would like to nominate a non-shooting partner, spouse, parent, guardian or friend to be an Associate Member of the Club, please give their details. They will receive club news and bulletins by email – there is no fee to pay.				
Name:-		,	email:-	, ,
Mem	bership No.	Fee Amount	Paid.	Verified by: