

Orion Gun Club  
Secretary Peter Cordery  
285 Rayleigh Road  
Thundersley  
Essex

Tel: 07802 273050

## Application Form Non-Voting Membership

Please answer all questions

Surname: Mr Mrs Miss Ms \_\_\_\_\_

Forenames: \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

Telephone Number: \_\_\_\_\_

E-mail: \_\_\_\_\_

Nature of Employment: \_\_\_\_\_

Do You Have A Shotgun Certificate? Yes / No

If Yes Certificate Number: \_\_\_\_\_

Issuing Authority: \_\_\_\_\_

Expire Date: \_\_\_\_\_

If No, Have You Applied For One: Yes / No

I Am Over 18 Years of Age: Yes / No

If No, Please State Date Of Birth: \_\_\_\_\_

I acknowledge receipt of a copy of the Club's Safety Rules, which I agree to observe, and I am liable to Expulsion from the Club for any breach of these rules. I also agree to abide by the Rules of the Orion Gun Club.

I hereby certify that the Orion Gun Club or any employee of the Orion Gun Club shall not be liable for any claim for damages and/or injuries of any nature whatsoever caused by act/s by myself should such action be intentional or accidental.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_