



Kingsville Shooting Sport Association Membership Application

Candidate:

Last Name:	First Name:
Address:	
City/Town:	Postal Code:
Home Phone No:	EMAIL:
Employer/Occupation:	
Date of Birth:	PAL # & Expiry Date:

Reference:

Last Name:	First Name:
Address:	
City/Town:	Postal Code:
Home Phone No:	EMAIL:
Comments:	
Signature:	

Do you have any Medical or Physical situations you feel should be disclosed? _____

Previous Club Affiliation(s) and Positions held, if any? _____

IMPORTANT: In order for NEW MEMBERS to start Probationary Training, they must report to the Range and Safety Officer, on the First Available Training Date!

All persons wishing to make application into this club must as New Members, provide the following information with this application:

1. A Copy of a Valid Firearms License.(PAL)
2. Payment in full of appropriate fees and dues. {Before start of training course}

New Members will be required to attend probationary training in class and on the firing line, before being recommended for membership.

Members transferring from other recognized clubs will be considered individually and will be required to supply the following information with this application:

1. A Copy of a Valid Firearms License.(PAL)
2. A letter of recommendation from an executive member of their club.

Date: _____ Applicants Signature: _____

Date: _____ KSSA Sponsor Signature: _____

Date: _____ Executive Approval Signature: _____



CANADIAN SHOOTING SPORTS ASSOCIATION

LEADING THE WAY...

MEMBERSHIP APPLICATION FORM

(Please Print)

FIRST NAME _____ LAST NAME _____

STREET, APT. # _____

CITY _____ PROV. _____ POSTAL CODE _____

RES. TEL (____) _____ BUS TEL. (____) _____ FAX (____) _____

E-MAIL _____ NAME OF CLUB _____

SHOOTING DISCIPLINE: Rifle Handgun Shotgun Black Powder Collecting Hunting

SIGNATURE OF APPLICANT _____ DATE _____

NEW MEMBERSHIP RENEWAL (Mem #) _____

Membership Options (please circle choice):

	<u>1 YEAR</u>	<u>2 YEARS</u>
General	\$45.00	\$85.00
Family	\$80.00	\$155.00
Junior	\$27.00	\$49.00
Corporate	\$250.00	
Life	\$950.00	

JUNIOR MEMBERSHIP: Members who have not reached their 18th birthday.

FAMILY MEMBERSHIP: Member + spouse + children under the age of 21 living at home and in full attendance at school.

FEE ENCLOSED:	\$ _____
I would like to make a CONTRIBUTION of \$50 \$100 Other to:	
Legal/Legislative Fund	\$ _____
Political Action Fund	\$ _____
Junior Fund	\$ _____
TOTAL PAYMENT:	\$ _____

PAYMENT OPTIONS:
VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> CASH <input type="checkbox"/> MONEY ORDER <input type="checkbox"/> CHEQUE <input type="checkbox"/>
YEARLY AUTOMATIC CREDIT CARD RENEWAL FOR MEMBERSHIP <input type="checkbox"/>
Card No. _____ Expiry Date _____ Cv _____
Signature _____
SEND CHEQUE OR MONEY ORDER TO:
CANADIAN SHOOTING SPORTS ASSOCIATION
116 Galaxy Blvd, Etobicoke, ON M9W 4Y6
Ph: (416) 679-9959 Fax: (416)679-9910 Toll Free: 1-888-873-4339
E-MAIL: info@cdnshootingsports.org