

# 2018 SAFGA Membership Application Form



(please tick)

- Central Branch; PO Box 45 St Agnes SA 5097
- Lake Bonney Sporting Clays; PO Box 481, Millicent SA
- Loxton Branch; PO Box 660, Loxton SA 5333
- Mt Gambier SE Branch; PO Box 1438, Mt Gambier 5290
- Rocky Gully Sporting Clays; PO Box 362, Burnside 5066

Name: .....DOB: .....  
 Home Address: ..... Post Code: .....  
 Postal Address: ..... Post Code: .....  
 Phone: Hm: .....Wk: .....Mob:.....  
 Email: .....

Firearms License: .....	License Expiry: .....
Classes: (circle) A    1, 2, 3, 4, 5, 6, 7, 8, 9	Please tick which membership you wish to apply for:
B    1, 2, 3, 4, 5, 6, 7, 8, 9	Open Male / Female            \$135.00 <input type="checkbox"/>
C    1, 2, 3, 4, 5, 6, 7, 8, 9	Pensioner Male / Female        \$115.00 <input type="checkbox"/>
	Senior Partner / Spouse         \$95.00 <input type="checkbox"/>
	Junior U/18                         \$74.00 <input type="checkbox"/>

**I hereby declare, that I am not subject to any court order prohibiting possession or use of a firearm, and have not had a personal firearms license cancelled or revoked in any State, Territory of the Commonwealth of Australia**

**SIGN:** .....

**Membership Application Continued...**

REFEREE 1

Character Referee – Full Name: .....

Character Referee Address:

.....  
.....

have known

(Full Name of Applicant) .....

for at least two years prior to this day and consider this person of good character and a suitable person to be a member of a Firearms Club/Branch.

Signed:..... Date: .....

Telephone:.....Mobile:.....

REFEREE CONTACTED AND CONFIRMED Date: .....

Name (Print): ..... Signed:.....

Position in Branch:.....

REFEREE 1

Character Referee – Full Name: .....

Character Referee Address:

.....  
.....

have known

(Full Name of Applicant) .....

for at least two years prior to this day and consider this person of good character and a suitable person to be a member of a Firearms Club/Branch.

Signed:..... Date: .....

Telephone:.....Mobile:.....

REFEREE CONTACTED AND CONFIRMED Date: .....

Name (Print): ..... Signed:.....

Position in Branch:.....