



Bicester Town & District Rifle and Pistol Club
(Est.1906)

Membership No:

MEMBERSHIP APPLICATION / RENEWAL

Applicant Name:

Date:

Instructions for Applicants

Form should be printed double-sided (4 sheets) – please ensure all pages are included.

Please complete all sections clearly and legibly in **BLOCK** capitals. If a question or section is not applicable, please state N/A.

All sections must be completed in ink and signed where applicable. Incomplete forms will be returned and your application will not be processed.

Please return the completed form and all accompanying documents to either the Duty Range Officer at Chesterton or to Mr Frank Slade (17 Ashby Road, Bicester, OX26 2LE), **by hand**. Postal applications will not be accepted.

Application Checklist For Duty Desk Officer

Please confirm application is complete by checking the boxes below (Do not accept incomplete applications):

- | | |
|---|---|
| <input type="checkbox"/> Completed Form | <input type="checkbox"/> Membership Card Enclosed (Renewals Only) |
| <input type="checkbox"/> Signed Declarations | <input type="checkbox"/> Full FAC Copy |
| <input type="checkbox"/> Payment Received | |
| <input type="checkbox"/> Passport Photo (New Applications Only) | |

Payment Received

Please indicate the total subscription received and the payment method:

- | | | | |
|---------------------------------|---------------------------------|--|-------------------------------------|
| <input type="checkbox"/> Annual | <input type="checkbox"/> Junior | <input type="checkbox"/> Chesterton | TOTAL £ <input type="text"/> |
| <input type="checkbox"/> Cheque | <input type="checkbox"/> Cash | <input type="checkbox"/> Bank Transfer | |



RECEIPT (RENEWALS ONLY - Please complete, detach and give to applicant)

Membership No:	Full Name:	
Desk Officer:	Date:	Subscription Paid:

Membership No:

(Club Use Only)

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1. Personal Information

Please read carefully and complete legibly.

APPLICANT INFORMATION	
Mr/Mrs/Miss/Ms/Other:	
Full Name:	
Current Address:	
Town/City:	County:
Post Code:	
Tel No. (Daytime):	
Tel No. (Evenings):	
Mobile:	
Email:	
Previous Address <i>(If less than 6 months in present address)</i>	
Town/City:	County:
Post Code:	

OTHER INFORMATION <i>(Required by Home Office)</i>	
Date of Birth:	Country of Birth:
Place of Birth:	

APPLICANT UNDER THE AGE OF 18 YEARS	
Full Name:	
Relationship to Applicant:	
Current Address <i>(If different from above):</i>	
Town/City:	County:
Post Code:	
Tel No. (Daytime):	
Tel No. (Evenings):	
Mobile:	
Email:	
I consent to my child/ward becoming a member of Bicester Town & District Rifle & Pistol Club	
Signature:	Date:

2. Emergency Contact

Please note that the club will be unable to accept any emergency contact without their signature to indicate consent for their details to be held on file.

CONTACT INFORMATION	
Full Name:	
Relationship to Applicant:	
Tel No. (Daytime):	
Tel No. (Evenings):	
Mobile:	
By signing below, I consent to Bicester Town & District Rifle & Pistol Club holding and processing my personal information.	
Signature:	Date:

3. Memberships & Affiliations

Will this be your Primary Club?	YES / NO
<i>Please list below any other clubs or associations you currently belong to:</i>	
National Rifle Association:	YES / NO
<i>Membership Type:</i>	<i>Membership No:</i>
National Smallbore Rifle Association:	YES / NO
<i>Membership Type:</i>	<i>Membership No:</i>
Muzzle Loaders Association of Great Britain:	YES / NO
<i>Membership Type:</i>	<i>Membership No:</i>
Membership of other Home Office Approved Club/s:	
<i>Club Name: (Please list below)</i>	<i>Address of Club:</i>

4. Shooting Experience

Please state your shooting experience and indicate the disciplines that you currently shoot or are interested in shooting. Not all disciplines are available at the Bicester Ranges.

Have you any shooting experience?	YES /NO

DISCIPLINE		DESCRIPTION
.22 Target Rifle		Open Sights, shooting jacket and sling
.22 Benchrest Rifle		Open or scope, seated from bench
Gallery Rifle		Light Sporting Rifle, underlever or self-loading rimfire
50m Pistol		.22 Long Barrel Target Pistol
Air Pistol		10m standing air pistol
Air Rifle		10m Standing air rifle
Fullbore Target Rifle		Fullbore calibre long range, open sights or scoped
Muzzle loading		Black powder or similar

5. References (New applications only)

Please provide the details of someone from whom the club can obtain a character reference. Please ensure you get permission from the person before providing their contact information.

CHARACTER REFERENCE <i>Someone of repute who has known you for at least 2 years (not a relative), or a club official from your previous Home Office Approved club.</i>
Full Name:
Profession / Club Position:
Tel No. (Daytime):
Tel No. (Evenings):
Email:

6. Firearms Certificate (If applicable)

Please provide the details of your current firearms certificate.

Do you hold a current firearms certificate?		YES / NO
Certificate No.	Issuing Police Force	Expiry Date

IMPORTANT: Please enclose a full copy of your current FAC with your application.

7. Shooter Certification Cards (If applicable)

Please indicate if you require Bicester to issue/renew your SCC card.

If you do not currently hold an SCC and would like to shoot on MOD ranges, please indicate here.

Please indicate your required SCC disciplines on the table below.

Telescope sighted Rifle		Muzzle Loaded Rifle	
Iron sighted rifle		Muzzle Loaded Pistol	
Long range pistol		Target Shotgun	
Short range pistol		HME firearms / ammo.	
Gallery rifle /carbine			

Please note that you may be asked to provide proof that you have completed the relevant competency training before a card may be issued.

NRA Membership

If you are currently a **Full** member of the NRA, please ensure you complete Section 3 when applying for an SCC.

8. Declarations

Please read the following declarations carefully and sign to indicate your acceptance.

<p>Club Rules and Constitution <i>I agree to be bound by the Club's current Constitution and Rules (Copies available on request). I understand that membership is subject to satisfying all probationary and Home Office requirements and is granted at the absolute discretion of the Management Committee. There is no automatic right to annual renewal.</i></p>	
<p>Signed:</p>	<p>Date:</p>

<p>Section 21 – Prohibited Persons Declaration <i>It is an offence for a person who is prohibited by Section 21 of the Firearms Act 1968 to have a firearm or ammunition in his/her possession at any time during their prohibition.</i></p> <p><i>This applies to any person who has been sentenced to 'custody for life', 'preventive detention', 'imprisonment', 'corrective training' or to 'youth custody' or 'detention in a young offender's institution' for three months or more. A person sentenced to 3 years or more is prohibited for life. A person sentenced to a period between 3 months and 3 years is prohibited for 5 years from the date of release.</i></p> <p><i>I certify I am not prohibited under Section 21.</i></p>	
<p>Signed:</p>	<p>Date:</p>

<p>Firearms Certificate / Club Membership <i>Have you ever had an application for membership of a Home Office approved club refused or membership revoked? Have you ever had an application for a firearms certificate or a shotgun certificate refused by the police or have you had a certificate revoked?</i></p> <p>YES / NO (Please provide details separately)</p>	
<p>Signed:</p>	<p>Date:</p>

<p>Data Protection <i>I confirm that I have read and understood the Club's Data Protection Policy and give my consent to the Club storing and processing my personal data. All data will be managed in full compliance with any Data Protection legislation currently in force.</i></p> <p>Personal Data – <i>The club may store your personal data in an electronic format for the purposes of administration and to comply with legal obligations as required by the Home Office.</i></p> <p>CCTV – <i>The Club may operate CCTV at its various premises for the purposes of Health and Safety and security.</i></p> <p><i>The applicant named on this form has the right to full disclosure of any information held and may (by contacting the Committee in writing), request deletion of this data at any time.</i></p>	
<p>Signed:</p>	<p>Date:</p>