

Huroniah Hand Gun Club Membership Application
P.O. Box 5096 * Penetanguishene, Ontario * L9M 2G3

Name: (Last) (First) (Middle)
Address: Apt. #
City: (Province) Post Code
Date of Birth (D/M/Y): Phone #:
Occupation: Employer:.....
Email: (Please print neatly):

Have you experience with firearms? (Y/N)..... What Types?
Have you completed any safety courses? Hunter Safety.....
Safety Instructor Range Officer Other
Are you a current member of another club or association?
Do you currently own any hand gunsor long guns
Do you have a criminal record? If YES please explain:.....
Do you have a sponsor in the Club? If YES, who?.....

Signature of Applicant :Date:.....

**NOTE: BE SURE YOU ENCLOSE COPIES FRONT & BACK OF YOUR CURRENT
PAL/RPAL and DRIVER'S LICENCE**

Your WAIVER must be signed and included.

**Mail completed form and waiver (address above) or email to
huroniahandgunclub@gmail.com**

FOR CLUB USE:

Initiation & Safety Course Fees: \$..... Received by.....Date.....
Annual Club Membership Dues: \$..... Received by.....Date.....
Membership Approved by:.....Date.....
Membership Denied by Club Executive (Reason)