

DUBLIN UNIVERSITY RIFLE CLUB

#

Membership Application Form

AY 2001-2

Surname

Forename

Gender

Date of Birth

D	M	Y
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Term Address

Phone

Home Address

(if different)

Home Phone

Course

(if Arts/TSM, give subjects)

Year

Email Address

Declaration

"I certify that :

1. I am not disentitled by law from holding a firearms certificate.
2. I am aware that the Garda Siochana will be informed of my membership of the club
3. I am not a member of a Proscribed Organisation"

Signed

Date

D	M	Y
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For Official Use Only

Student/DUCAC Number

Safety Briefing

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Club Fee

IR£

Instructor

Current ID seen by

Received by

Date

D	M	Y
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Date

D	M	Y
---	---	---

Date

D	M	Y
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