

VICTORIA PRECISION SHOOTING ASSOCIATION MEMBERSHIP APPLICATION

Complete all sections (please print) and sign at the bottom of the form.

LAST NAME	FULL NAME	NAME USED
STREET ADDRESS	CITY, PROVINC	POSTAL CODE
HOME TELEPHONE	CELL PHONE	EMAIL ADDRESS
PAL NUMBER or DATE OF BIRTH (to med	et Firearms Act shooting club re	equirements):
North Saanich Rod and Gun Club member	er: Yes 🗆 No 🗆	
Types of firearms you intend to use:	□ .22 cal handgun □ Cent	re fire handgun 🛛 .22 cal rifles
☐ Airgun handgun or rifle	□ other - specify	
Please give recent target shooting expe	rience (name of club(s)/organi	zation(s) and dates.
Please state why you want to become a side if needed.	VPSA member and what you w	ill bring to the club. Continue on reverse
	the constitution and obey the and to pay the applicable fee	
Signature	Date	
MEMBERSHIP APPROVAL (For new applic	ations, the signatures of three	directors are required)
1		
2	DATE OF MEMB	ERSHIP START:
3		
Membership fee paid ☐ Cash	Cheque Date	Paid