

Fiordland Firearms Club

New Member Application Form

Send to: Mark Lovell, PO Box 27, Te Anau 9640

You must be nominated by an Existing Member of the Club:

Nominated by: _____

Their Phone Number: _____

Date of Application: _____

Your Surname: _____

Your First Names: _____

Firearms Licence #: _____

Expiry Date: _____

Endorsements Held: B (Pistol) _____ (tick)
C (Collectors) _____ (tick)
D (Dealers) _____ (tick)
E (MSSA) _____ (tick)

Your Physical Address: _____

Your Mailing Address: _____

Your Phone: _____

Mobile: _____

Fax: _____

Email: _____