

**PARRY SOUND PISTOL CLUB INC.**



PARRY SOUND PISTOL CLUB  
P.O. BOX 511 PARRY SOUND,  
ONTARIO P2A 2X5  
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**MEMBERSHIP APPLICATION**

DATED \_\_\_\_\_

PLEASE PRINT CLEARLY: APPLICATIONS CAN BE SUBMITTED IN PERSON, E-MAILED OR SNAIL MAILED TO ANY MEMBER OF THE EXECUTIVE.

NAME IN FULL \_\_\_\_\_ BIRTH DATE \_\_\_\_\_ Day / month / year

STREET ADDRESS \_\_\_\_\_ TOWN or CITY \_\_\_\_\_

POSTAL CODE \_\_\_\_\_ PHONE NO. - HOME \_\_\_\_\_ WORK \_\_\_\_\_

E-MAIL \_\_\_\_\_

P.A.L. or P.O.L. NO. \_\_\_\_\_ EXPIRY DATE \_\_\_\_\_

DO YOU HAVE FIRST AID OR C.P.R. TRAINING ? \_\_\_\_\_

DO YOU PREFER WE CONTACT YOU AT: (CIRCLE) HOME or WORK

DO YOU HAVE A PERMIT TO CONVEY A RESTRICTED FIREARM? Yes \_\_\_ No \_\_\_

If yes, state certificate number. \_\_\_\_\_

- 1) Do you presently own a handgun? Yes \_\_\_ No \_\_\_
- 2) Are you presently forbidden to own or possess a firearm? Yes \_\_\_ No \_\_\_
- 3) Have you ever been, or are you currently, a member of another gun club? (Pistol, Revolver, Rifle, Trap, Skeet, etc.)? Yes \_\_\_ No \_\_\_

If yes, give name and location of Club and a contact person s name, address and phone number

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4) Please state your reasons for making an application to our Club \_\_\_\_\_

5) Recommended or Sponsored by (P.S.P.C. Inc. Club Member) \_\_\_\_\_

**Prospective Members must attend a two-part Safety Course given by Qualified Club Instructors**

**Part A)** After attending approx. 8 weeks & 4 shoots at the club and observing club members shoot on the line, you will be given a classroom type instruction on safe handling and features of basic handgun use

**Part B)** After attending the classroom type safety course, you will be given supervised instruction on the range.

Part A and Part B may be instructed on separate occasions.

Applicants that are in possession of a valid A.T.T. can be exempted from Part A & B at the discretion of the Club Safety Officer

**\*\* Applicant MAY NOT, under any circumstances bring handguns to the range before they possess a valid P.S.P.C. Inc. Membership Card and Authorization to Transport (A.T.T.).**

— On the above-mentioned date, I hereby make application for membership in the P.S.P.C. Inc. If my membership application is accepted, I will serve the eight week mandatory probation period, during which time, I will endeavor to obtain a thorough knowledge of the club by-laws and range rules of this organization.

I will pay the sum of \$ \_\_\_\_\_ which includes membership fees to the P.S.P.C. Inc., the Canadian Shooting Sports Association (C.S.S.A.), the Parry Sound Anglers & Hunters Inc. and the Ontario Federation of Anglers & Hunters (O.F.A.H.).

I hereby authorize the Executive of the P.S.P.C. Inc. to make whatever inquiries necessary pertaining to my joining this club.

By signing this application form I affirm the information given is true to the best of my knowledge.

SIGNATURE OF APPLICANT \_\_\_\_\_ PRINTED NAME \_\_\_\_\_

—

Witnessed by \_\_\_\_\_ Relationship to you \_\_\_\_\_