

# Swadlincote Rifle & Pistol Club

P.O. Box 55, Swadlincote, Derbyshire. DE11 9JP (correspondence only)  
Range Complex: Park Range, Park Road, Swadlincote, Derbyshire. DE11 0TX  
T: 01283 226790 E: admin@swad-rpc.org.uk

Home Office Approved Club No. 08/1/7/4/1/2/1/2/3/22  
Chairman: N. Barker Secretary: B. McKle Treasurer: N.S. Merriman  
Affiliated to: N.S.R.A., N.R.A., U.K.P.S.A., M.L.A.G.B.



## Probationary Firearms Membership of SRPC

Mar 17 v1.5

Below is an application form for probationary membership of the 'Swadlincote Rifle & Pistol Club'. Your application must be sponsored by one full club member and also by one other person who knows you personally (this person should not be a close relative of yourself). The Committee will review your application and if approved you will become a Green badge member. A green badge indicates a probationary member, authorized to handle firearms or ammunition only when under the supervision of an allocated club trainer.

Probationary membership is for a minimum period of 3 months. All probationary members, whatever their shooting experience must attend and pass the Club's theory and practical firearms course. The committee will then meet the new member before authorising Red badge membership. A red badge indicates a full member who is authorized to handle firearms and ammunition without supervision. A red badge with 'HVV' on it indicates that the member has provided details of 'HV' experience and been found competent by one of the club authorized NRA RCOs to use the HV range under the supervision of a non-shooting RCO.

## Airgun & Bow Sports Membership of SRPC

Below is an application form for airgun and bow sports membership of the 'Swadlincote Rifle & Pistol Club'. Your application must be completed in full. The Committee will review your application and if approved you will become a Yellow badge non firearms member. Suitable instruction on range protocols and behaviour will be given to all new members on their being accepted by the committee.

The current club fees, as decided at the 2016 AGM, are as follows :-

		Joining Fee
Standard membership one year subscription	£148	£50
Senior (age 65 years or over)	£74	£50
Spouse/Partner (the partner of a full member)	£74	
Young Person :- (age 17 but under 21)	£74	
Junior membership (up to 17 years of age)	£37	



## APPLICATION FOR PROBATIONARY FIREARM MEMBERSHIP

### SECTION 'A' (All applicants must complete this section)

Please tick preferred disciplines)

Full Name:	
Address:	
County:	Post Code:
Tel:	Mobile:
Email:	Date of Birth:
Place of Birth: Town/City/Country	
In which constabulary area do you live?	

.22 RIFLE	<input type="checkbox"/>
HV CENTRE FIRE RIFLE*	<input checked="" type="checkbox"/>
PISTOL CALIBRE RIFLE	<input type="checkbox"/>
BLACKPOWDER RIFLE	<input type="checkbox"/>
BLACKPOWDER PISTOL	<input type="checkbox"/>
LONG BARREL PISTOL*	<input checked="" type="checkbox"/>
PRACTICAL SHOTGUN	<input type="checkbox"/>

\*Training on these firearms is not available to probationary members

### SECTION 'B' (FAC holders must complete this section)

Name of any shooting club of which you are or were a member and from whom you must ask for a written & suitable reference.

Certificate Number:
Date of Grant:
Issuing Authority:

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### SECTION 'C' (All applicants must complete this section)

	YES	NO
Have you ever been convicted of any crime ?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever received treatment for any form of depressive or mental illness, including prescribed absence from work ?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have any conditions or problems that would make it difficult for you to understand or follow range safety rules and instructions?	<input type="checkbox"/>	<input type="checkbox"/>
Are you taking any prescribed medication which may have an effect on your ability to maintain safe practices on the range?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever taken any drugs socially (excluding alcohol or tobacco) ?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever had an application for a firearm or shotgun certificate refused by the police, had a certificate revoked or an application not granted?	<input type="checkbox"/>	<input type="checkbox"/>

\* If you answer YES to any of the above questions it will assist the processing of your application if you provide additional relevant information on a separate sheet of paper.

**You must provide a personal sponsor\* and an SRPC sponsor\*\*, please complete their details below**

\* Your personal sponsor is someone who has known you for at least 2 years and is prepared to state that you are of good character

\*\* The club sponsor must be a full member of SRPC and be prepared to back your application for membership of the club

<p><b>Personal Sponsor</b></p> <p>I am not aware of any reason why</p> <p>.....</p> <p>should not be admitted as a probationary member of the Swadlincote Rifle and Pistol Club</p> <p>Name .....</p> <p>Address .....</p> <p>.....</p> <p>Signature .....</p>
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<p><b>Club Sponsor</b></p> <p>I (Print Name and Membership Number)</p> <p>.....</p> <p>Propose that</p> <p>.....</p> <p>is accepted as a probationary member of the Swadlincote Rifle and Pistol Club</p> <p>Signature .....</p>
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## APPLICATION FOR PROBATIONARY FIREARM MEMBERSHIP

Please provide a brief personal statement as to why you wish to become a member of SRPC and what you would hope to gain from club membership. You may wish to include any previous shooting experience you may have in your statement.

### SECTION 'D' (All applicants must complete this section)

**Please read and make sure you understand the following declaration before signing**

**Please be aware that in the case of Junior Firearms members, a parent or guardian must be present at all times that the 'shooter' is on the range.**

**The parent or guardian MUST be a full firearms member of SRPC**

I am aware that the relevant police authorities will be notified of this membership application. I hereby apply for membership of Swadlincote Rifle and Pistol Club and agree that, should my application be successful, I will always conform to the conditions contained in the Club Constitution, the Club Safety Rules, the Range Safety Certificates and such other rules and conditions as laid down, from time to time by the club committee.

<b>Signature of Applicant</b>	<b>Date of Application</b>
	..... dd/mm/yyyy

**Check list: please make sure you have completed all sections of this form, that you have included a passport sized photograph of yourself and the relevant payment, otherwise you application will be returned**

**Please tick:** Fully completed form  Photograph included  Payment included

### OFFICE USE ONLY

Fee Paid	Date of Acceptance	Classification	Membership Number
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## APPLICATION FOR AIRGUN & BOWSPORTS MEMBERSHIP ONLY

### SECTION 'A' (All applicants must complete this section)

Please tick preferred disciplines)

Full Name:	
Address:	
County:	Post Code:
Tel:	Mobile:
Email:	Date of Birth:
Place of Birth: Town/City/Country	

PRECISION RIFLE	<input type="checkbox"/>
PRECISION PISTOL	<input type="checkbox"/>
FIELD TARGET	<input type="checkbox"/>
BOWSPORTS	<input type="checkbox"/>

### SECTION 'C' (All applicants must complete this section)

	YES	NO
Have you ever been convicted of any crime ?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever received treatment for any form of depressive or mental illness, including prescribed absence from work ?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have any conditions or problems that would make it difficult for you to understand or follow range safety rules and instructions?	<input type="checkbox"/>	<input type="checkbox"/>
Are you taking any prescribed medication which may have an effect on your ability to maintain safe practices on the range?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever taken any drugs socially (excluding alcohol or tobacco) ?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever had an application for a firearm or shotgun certificate refused by the police, had a certificate revoked or an application not granted?	<input type="checkbox"/>	<input type="checkbox"/>

\* If you answer YES to any of the above questions it will assist the processing of your application if you provide additional relevant information on a separate sheet of paper.

Please provide a brief personal statement as to why you wish to become a member of SRPC and what you would hope to gain from club membership. You may wish to include any previous shooting experience you may have in your statement.

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## APPLICATION FOR AIRGUN & BOWSPORTS MEMBERSHIP ONLY

*SECTION 'D' (All applicants must complete this section)*

**Please read and make sure you understand the following declaration before signing**

**Please be aware that in the case of Junior airgun & bowsports members, a parent or guardian must be present at all times that the 'shooter' is on the range.**

**The parent or guardian does not need to be a member of SRPC**

I hereby apply for membership of Swadlincote Rifle and Pistol Club and agree that, should my application be successful, I will always conform to the conditions contained in the Club Constitution, the Club Safety Rules, the Range Safety Certificates and such other rules and conditions as laid down, from time to time by the club committee.

I am aware that I am likely to be in close proximity to other club members who may be using firearms and live ammunition, but under no circumstances should I handle such firearms or ammunition. The exception to this ruling is on organised club 'Guest Days' of which the police authorities have been informed of by the club.

I understand that should I wish to receive firearms training then it will be necessary for me to complete another application form to apply for Probationary Firearms Membership

<b>Signature of Applicant</b>	<b>Date of Application</b>
	..... dd/mm/yyyy

**Check list: please make sure you have completed all sections of this form, that you have included a passport sized photograph of yourself and the relevant payment, otherwise your application will be returned**

**Please tick:** Fully completed form  Photograph included  Payment included

### OFFICE USE ONLY

Fee Paid	Date of Acceptance	Classification	Membership Number
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