



Club/Association Application Support

WESTERN AUSTRALIA POLICE
STATE CRIME
Licensing Enforcement Division
Licensing Services
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This document is to be completed by an approved member of a Firearm Association or a Club and is only valid when submitted as a supporting document to a Firearm Application.

Club Details

| | | | | | |
|---|----------------------|---------------------------|-----------------------|--|----------------------|
| Club Name | <input type="text"/> | | | Club Number | <input type="text"/> |
| Association Details <small>If applicable</small> | <input type="text"/> | | | Licence Number <small>Corporate Licence</small> | <input type="text"/> |
| Unit / Lot / Level | <input type="text"/> | Street Number | <input type="text"/> | Street Name | <input type="text"/> |
| Street Type | <input type="text"/> | | Suburb | <input type="text"/> | |
| State | <input type="text"/> | Post Code | <input type="text"/> | Email | <input type="text"/> |
| Business Phone | <input type="text"/> | Club Contact Mobile Phone | <input type="text"/> | | |
| Contact Name | <input type="text"/> | | Contact Position/Role | <input type="text"/> | |

Applicant Details

| | | | | | |
|--|----------------------|---------------|----------------------|----------------------|----------------------|
| Family Name | <input type="text"/> | | | Date of Birth | <input type="text"/> |
| All Given Names | <input type="text"/> | | | | |
| Unit / Lot / Level | <input type="text"/> | Street Number | <input type="text"/> | Street Name | <input type="text"/> |
| Street Type | <input type="text"/> | | Suburb | <input type="text"/> | |
| State | <input type="text"/> | Post Code | <input type="text"/> | Email | <input type="text"/> |
| Home Phone | <input type="text"/> | Work Phone | <input type="text"/> | Mobile Phone | <input type="text"/> |
| Licence Number <small>If applicable</small> | Expiry Date | | <input type="text"/> | State of issue | <input type="text"/> |

Description of firearm/s

Description: Example. Lever Action,
Bolt Action, Under/Over Shotgun

| Description | Make | Serial Number | Calibre | Discipline |
|-------------|------|---------------|---------|------------|
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The applicant named in this application is an active and financial member of the above mentioned club.

The applicant has fulfilled Association By-law requirements, therefore the applicant has the approval and support of the Club to participate in approved Club or Association events, activities or competitions. Date applicant joined club

| | | | | | |
|---------------------------|----------------------|-----------------------|----------------------|------|----------------------|
| Club Officer Signature | <input type="text"/> | Contact Position/Role | <input type="text"/> | Date | <input type="text"/> |
|---------------------------|----------------------|-----------------------|----------------------|------|----------------------|