



West Australian Rifle Association Inc.
Pinjar Rifle Range, Pinjar WA 6078
PO Box 1559, WANGARA DC WA 6947
clubassist@wara.asn.au

CLUB TRANSFER MEMBERSHIP FORM

Membership Number: _____

Surname: _____ First Name: _____

Address: _____

Date of Birth: _____ Mobile: _____

Email Address: _____ @ _____

Gender (please circle): **Male** **Female** **Other**

Firearms Licence Number: _____ Club Supported: **Yes** **No**

Discipline (please circle): **TR** **FS** **FO** **FTR** **PC** **PCO** **SERVICE**

Hereby apply to be transferred from the:

_____ Rifle Club to the _____ Rifle Club

REASON: _____

Transferring Member's Signature: _____ Date: _____

Outgoing Club Captain's Signature: _____ Date: _____

NEW CLUB CAPTAIN'S STATEMENT

I _____, Captain of the _____ Rifle Club certify that the applicant's reason for transferring has been accepted and the applicant has been elected as a member of the Club.

New Club Captain's Signature: _____ Date: _____

Please return completed form to clubassist@wara.asn.au