

STRAIGHT SHOOTERS gun club, inc.



DATE:					
STATUS FOR NEW MEMBER :		R: PROBATIONAF	RY REGULAR	I.D.	
FULL	NAME:		-	PICTURE	
NICKNAME:		BIRT	HDAY:/		
BIRTHPLACE:					
STATUS: CITIZENSHIP:_					
НОМ	E ADDRESS/ES:				
Cell F	Cell Phone No./s: Tel.No.:				
E-mail Address/es:					
Institution/Company:					
Institution/Company Address:					
FIREARMS INFORMATION 1					
	KIND/MAKE	MODEL	SERIAL NO.	EXPIRY DATE	
2.	KIND/MAKE	MODEL	SERIAL NO.	EXPIRY DATE	
	I HEREBY CERTIFY THAT THE ABOVE INFORMATION ARE TRUE AND CORRECT				
TO THE BEST OF MY KNOWLEDGE. I WILL ALSO ABIDE BY THE RULES AND					
	REGULATIONS SET BY THE				
	STRAIGHT SHOOTERS GUN CLUB, INCORPORATED				
	AND WILL ALWAYS PRACTICE SAFETY AND RESPONSIBLE HANDLING OF				
	FIREARMS AT ALL TIMES.				

DATE:_____SIGNATURE:____