

International Police Association Pistol Club Ireland

Membership Application Form

Please use **BLOCK CAPITALS** when completing this form. Enclose one passport photograph and a cheque for €50 (membership fee) made payable to IPA Pistol Club and post it to the address below.

Personal Details

Name: _____ Registered Number: _____

Home Address: _____

Garda Station: _____ County: _____
(if you are a serving member of An Garda Síochana)

Home Telephone: _____ Mobile: _____

Email address: _____

Are you a member of a Gun Club? Yes No
If the answer to the above question is "Yes" please provide the name and address of the Gun Club _____

Firearm Details

Type of Firearm: Pistol Revolver:
Make: _____ Model: _____ Firearm Pulse number _____

Insurance Details

Name of Company you are insured with: _____

Period of Cover: From _____ To _____

(Insurance cover is a pre requisite to becoming a member of the I.P.A. Pistol Club)

Declaration

I agree to be bound by the Constitution and Rules of "The International Police Association Pistol Club Ireland."

Signature: _____ Date: _____