

Haliburton County Marksmen Club Membership Application

Please submit to HCMC Inc. P.O. Box 56, Kiinmount ON K0M 2A0

INCOMPLETE APPLICATIONS WILL DELAY THE REVIEW OF YOUR APPLICATION

This form may be filled out and printed on your computer

This application will be accepted from October 1 to December 31, 2023

Name (as appears on your R/PAL): _____

Name (as you would like it displayed on your membership card): _____

Address: _____ City: _____ Postal Code: _____

Home Phone: _____ Cell Phone: _____

Email: _____

If you currently have a Firearms Licence (PAL), please fill in the details below:

Firearms Licence Number: _____ Expiry Date: _____ (dd-mmm-yyyy)

Please include a copy of both sides of your firearms license and other qualification certificates

Are you now, or have you ever been, a member of another shooting club? YES / NO

Details if YES: _____

Have you successfully taken the CSSA Handgun Safety Course or equivalent firearms safety course? YES / NO

Details if YES: _____

You must be a member of CSSA while a member of HCMC.

If you are already a member please add this Club to your membership information at the CSSA office.

CSSA Number: _____ Expiry Date: _____ (dd-mmm-yyyy)

If you are not a CSSA member please include proof of application (Screenshot of your application)

List two (2) current members of HCMC who will sponsor your membership

Name: _____ Signature: _____

Name: _____ Signature: _____

If you do not have HCMC sponsors an interview with Board members is mandatory.

Check this box to be included in HCMC emails for bulletins and information.

By my signature, I acknowledge that I have read, and agree to abide by, HCMC's Constitution and By-Laws, Range Safety Basics and related guidelines as displayed on the website, posted at the Club, or otherwise made available. I understand that non-compliance may result in Club discipline which may include suspension of membership and/or range access. I also acknowledge that I have read and fully understand the accompanying document that outlines the responsibility of the Member, herein described, to act as a Range Safety Officer as required on HCMC property.

Applicant's Signature: _____ Date: _____

NEW MEMBER FEES: Single \$630.00 Family* \$645.00 Junior** \$51.00

Fees include a one-time initiation fee of \$500.00 for single and family memberships.

Fees are payable by cheque or money order. Please no cash.

*Family Membership: Member + Spouse + Children seventeen years of age and under.

Note: Provide names of Family members on Page 2. Family members who will be regularly active shooters should fill out separate applications and attach them to the main family member's application.

**Junior Membership: Member who has not reached his/her 18th birthday.

List your Shooting Qualifications/Experience:

Are you a certified Range Officer, Coach, Instructor or otherwise qualified?

Specific Qualification(s): _____

Club Affiliation: _____ **Date Qualified:** _____ (dd-mmm-yyyy)

If you are Holster Certified, please enter the details below:

Specific Qualification: _____
Club Affiliation: _____ **Date Qualified:** _____ (dd-mmm-yyyy)

Family Members

Record the names of family members below:

Names:	Birthdate of Children 17 years of age and under (dd-mmm-yyyy)
_____	_____
_____	_____
_____	_____
_____	_____

HCMC Inc. Use Only

Date Received: _____ (dd-mmm-yyyy)
Date Reviewed by Board: _____ (dd-mmm-yyyy)
Date approved for Probationary Status: _____ (dd-mmm-yyyy)
Date Club Level Safety Course Completed: _____ (dd-mmm-yyyy)
Date 6 Probationary Shoots (Minimum) Completed: _____ (dd-mmm-yyyy)
Date approved for Regular Member: _____ (dd-mmm-yyyy)