

Haliburton County Marksmen Club Membership Application

Please submit to HCMC Inc., P.O. Box 56, Kinmount, 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, 2025

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 _____

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

Indicate the Type of Membership you want - Restricted or Nonrestricted

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 _____

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 if available

Name _____ Contact telephone # _____

Name _____ Contact telephone # _____

An interview with Board members will be scheduled in March 2026

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 and are due upon acceptance.

Fees are payable by cheque, money order or e-transfer to hcmcnet2020@gmail.com. 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** _____

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

Specific Qualification _____

Club Affiliation _____ **Date Qualified** _____

Family Members

Record the names of family members below:

Names:

Birthdate of Children 17 years of age and under (dd/mm/yyyy).

_____	_____
_____	_____
_____	_____
_____	_____

HCMC Inc. Use Only

Date Received _____
dd/mm/yyyy

Date Reviewed by Board _____
dd/mm/yyyy

Date approved for Probationary Status _____
dd/mm/yyyy

Club Level Safety Course
Date Completed _____
DD/MM/YY

6 Probationary Shoots (Minimum)
Date Completed _____
DD/MM/YY

approved for Regular Member _____
DD/MM/YY