

# Kidderminster Gun Club

Renewal of Membership

Date \_\_\_\_\_

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

Telephone No. \_\_\_\_\_

E-Mail Address. \_\_\_\_\_

Renewal Subscription - £25 (£20 if paid before 31<sup>st</sup> May)

Shotgun Certificate No. \_\_\_\_\_

Are you a member of any other club or clubs? YES / NO

If yes please give name(s) \_\_\_\_\_

Member's comments are always welcome and will be discussed at the next committee meeting.

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Signatures \_\_\_\_\_

Please return to; Peter Trice  
C/O Kidderminster Gun Club

Thank You.

## Safety

As a responsible body, the committee would ask you to always wear eye, ear and head protection when shooting at Kidderminster Gun Club.