Details Required by SSAA Townsville Branch Inc.

For New or Renewal of Pistol Licence

**Do Not send as a photo from a phone or Ipad** or anything else. Send as PDF or Word doc.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **\*\*Circle one only**  New Renewal | **Place details in this column.**  **Details must be the same as on licence.** | | | | | | |
| \*Family Name |  | | | | | | |
| \*Given Names |  | | | | | | |
| \*Street Number and Name |  | | | | | | |
| \*Suburb / Postcode |  | | |  | | | |
|  | | | | | | | |
| **Date Of Birth** |  | | | | | | |
| \*Day/Month/Year |  | | | | | | |
|  | | | | | | | |
| **\*SSAA National**  Membership Number |  | | Expiry Date | |  | | |
|  | | | | | | | |
| **\*Local**  Membership Number |  | | Expiry Date | | |  | |
| \*Date Joined or date on Statement of Eligibility if new applicant |  | | | | | | |
| \*Dates of Recorded Shoots  (as per your participation record) |  |  | | | | |  |
| \*Do you require endorsement for Single Action or Metallic  Silhouette? (Y/N) |  | | | | | | |

Please fill out legibly, all sections marked \* are mandatory.

For new Cat H applicants, also send a copy of participation record.

**Do Not send as a photo from a phone or Ipad** or anything else. Send as PDF or Word doc. Email competed form to: [secretary@ssaatownsville.org.au](mailto:secretary@ssaatownsville.org.au)