

Application Form for Membership



Please use this form if you wish to join the MLAGB. Please complete this form in full and attach the relevant documents required along with your subscription either Cheque or Card Payment. Then post as either 1st or 2nd class (not as recorded or to be signed for) to **Andrew Grimmett, Valley View, Heyford Road, Upper Heyford, Bicester, Oxon, OX25 5PQ**. Please note that membership data is held by a third party, EML Team, 130 Worcester Road, Droitwich Spa, Worcestershire, WR9 8AN.

Personal Details

Title:	Date of birth:
Full name:	Place of birth:
Address:	Country of birth:
	Tel (home):
	Tel (mobile):
	Email:
Post code:	
Which MLAGB branch do you intend to join?	

Membership Categories and Fees (please tick)

Category	Description	Fee*	Please Tick
Full	For applicants between 21 and 65 years of age	£82	
Junior	For applicants under 21 years of age	£56	
Family Shooting	For applicants where a family member is an existing full member of the MLAGB	£71	
Senior	For applicants over 65 years of age	£71	

* Please note that the fees listed include a £20 one off joining fee. Membership year runs 1st January - 31st December. Members joining after 1st August pay half the normal fee. Members joining in November or December may choose to pay the full fee and have membership for the following year included.

Application Requirements

Please note that new members must serve a probationary period of six months. Probationary membership may be waived if either requirement 1 or 2 is met. Please note that any probationary member who wishes to apply for a firearm certificate on the basis of membership of the MLAGB must receive training with the MLAGB during his/her probationary period. Only on completion of this training will a full membership card be issued.

1. If you hold a current firearm certificate, please provide the following details:		
Photocopy of Firearm certificate enclosed	Yes	No
Do you wish the MLAGB to be your Primary Reporting Club?	Yes	No
2. If you are a member of a home office approved club, the following details and endorsement by a club official are required.		
Name of home office approved club		
Name of club official		
Position of club official		
Contact details (phone number & email)		
Signature of club official		

Declarations - Please complete all applicable sections

I certify that:

- I am not prohibited from possessing firearms or ammunition under section 21 of the Firearms Act 1968 as amended. (I have not been sentenced to a term of imprisonment of 3 months or more).
- I have never had an application for a firearms certificate, or a shotgun certificate refused by the Police and have never had a certificate revoked.
- I certify that I am not currently subject to an ongoing police investigation or awaiting sentencing.

Signature:

Date:

I hold a current firearm certificate as follows, and I am a member of the home office approved club that is listed on my firearm certificate (if any):

Issuing Authority:

Certificate Number:

Signature:

Date:

Proposer

Proposer - the proposer must be a full member of the MLAGB:

Name (block capitals)

MLAGB Membership Number

Signature

Principal Interests (please tick)	
Rifle	<input type="checkbox"/>
Musket	<input type="checkbox"/>
Pistol	<input type="checkbox"/>
Shotgun	<input type="checkbox"/>
Miniature cannon	<input type="checkbox"/>
Collecting	<input type="checkbox"/>
Payment	
Payment may be made by cheque, credit or debit card	

Visa Credit/Debit, Maestro, Switch, Mastercard

Card number:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Start Date:

Expiry Date:

Name on the card:

Security No:

Issue No:
(If Maestro)

Signature:

I hereby apply for membership of the Muzzle Loaders' Association of Great Britain and undertake to abide by the Rules of the Association if I am accepted. My enrolment fee (£20) and first year's subscription are enclosed. I have read and understand the MLAGB Data Policy (available at www.mlagb.com/downloads) and I agree that my personal data can be retained as detailed in this policy.

Signature:

Date:

Signature of parent or guardian (if applicant is under 18 years old)

Date:

MLAGB use only:

Police Check		Form:	Reference:	Payment	FAC		Membership No:
Sent:	Received:	Rec'd:	Check:	Rec'd	Copy	Original	
Initials:							