Introductory Safety Talk Request

I wish to attend a safety talk for beginners. I understand that I must apply for Probationary Membership before I am eligible for supervised tuition in competitive target shooting. (Application may be made at the Safety Talk.)

First Name	Middle Names	Surname		
Other Surname	Other surn	Other surnames names you have been		
		known by		
Address				
Town				
Postcode		Telephone		
Email Address	1	iciopiiciic		
Date of Birth	Place of Birth			
Signature		(Parent or guardian if under 18	years)	
Date				
I understand that this form will be forwarded to Surrey Police Firearms Licensing Division.				
Forwarded to Surre	ey Police Firearms Licensing Division:			
· ·	y rollee rirearns Electising Division.	Date of Cafety Talls		
Signature		Date of Safety Talk		
Position				
Date				

Chobham & District Rifle Club Station Road, Chobham, Surrey GU24 8AL