

Membership Application Form

Captain Kidd Rod and Gun Club

P.O.Box 381, Highway #3

East Chester, N.S. B0J 1J0



Name: _____

Mailing Address: _____

City/Municipality: _____ Postal code: _____

Home telephone: _____ Cell #: _____

Email address: _____

Date of birth: _____

Firearm's license # _____ Type: _____ Expiry: _____

Employment detail:

Occupation: _____

Employer: _____

Employer address: _____

Next of Kin:

Name: _____ Relationship: _____

Address: _____ Telephone: _____

Are you presently a member of a gun club? **Y / N** How long _____

If so, name and address of Club:

Please check the following that interest you:

- Rifle shooting Shotgun shooting Handgun Shooting Archery
 Sport Fishing Social Other _____

Applicant signature : _____ Date _____

Sponsoring Member: _____ Signature: _____

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Please include a picture of your driver's license and the \$85.00 membership fee. Membership fee can be sent by etransfer to captkiddpayments@gmail.com, by mail to address above or provided at the monthly meeting. Upon acceptance a membership Card will be issued. Annual dues are payable by January 1st of each year.