



The Association of Professional Shooting Instructors

# Membership Application

Please return your completed application to:

APSI c/o Chris Miles, 5 Birch Grove, Forsbrook, Stoke on Trent. ST11 9PT

Tel: 01782 397961 / 07850 547990

Please complete the following information in **BLOCK CAPITALS**

Family Name

Given Names

Title

Date of Birth

Nationality

Address

Post Code

Telephone

Email

## Please Note

If your membership application is successful your name and telephone number (not your address) may be distributed as part of a Members' List to future applicants in order that they may locate two proposers from within the Association.

Please complete this application only if you agree to this.

## I agree to the rules of Membership Application

Signature

Date

A **cheque for £195 must accompany this application** (See Page 2 for details of fees).

Should membership be refused you will receive an appropriate refund.

Please tick fee enclosed.

## Notes

1. Requirements of membership are as stated in the 'Rules of Membership Application'.
2. Members or Fellows may only propose applicants well known to them.
3. The Membership Committee will take up all references as required and may make relevant enquiries to satisfy the Committee of the applicant's status.
4. The Association reserves the right to decline membership for whatever reason.