

Bury St Edmunds Pistol and Rifle Club

About the Club

Affiliations:

The Club is Home Office Approved, and affiliated to the National Rifle Association (NRA), and Muzzle-Loaders Association of Great Britain (MLAGB).

Opening Times:

The Club meets on Saturdays from 2 until 4pm and on Sundays from 10.30 until 1.30pm all year round. There are Wednesday meetings in summer from 7pm until the light fades. The covered target Air-Gun Range (.177, rifle or pistol), is open Mondays evenings from 7.30pm until 9pm in winter. This changes to Wednesdays during the summer. The more powerful Air-guns should only be used on the 25 metre Range.

Facilities:

The Club has a (covered) 10-bay Firing Point at 25 metres, with open-air shooting at 10, 15, 20 metre distances. There are computerised electronic Turning Targets, which cover Rapid Fire, Duelling, Police Rifle, Repeating Rifle, Melee etc., as well as Precision disciplines. The fully enclosed 10 metres Target air range has five lanes with electronic target changers.

Frequently asked questions

Probationary membership lasts 3 months / 10 visits

Joining age- 16 but 14 if a parent or guardian is a member

Membership costs:-

Probationary membership fee = £50.00

Full membership:

After completion of the probationary period = one off joining fee = £25.00 + a one years subscription fee = £110.00

Thereafter subscription will be £85.00 per year

There are no range fees but targets cost 50p / bundle to cover cost of targets and frames

**BURY ST EDMUNDS PISTOL CLUB
MEMBERSHIP APPLICATION FROM**

DECLARATION

I declare that I am not banned from using Firearms under Section 21 of the Firearms Act 1968. The ban applies if the applicant has been sentenced to Youth Custody/Prison for 3 Months up to 3 years: time limit for the ban is then five years. For those sentences exceeding 5 years the ban is for Life.

Signed..... Date.....

PERSONAL DETAILS

Full Name.....
Address.....
.....Post Code.....
Date of birth..... Telephone.....
E-mail:
How long at this address?.....years:
If less than one year, please give previous
address:.....
.....Post Code.....

Name and Address of Employer.....
.....
.....Post Code.....
Years Service:.....Occupation:.....
Note: No Contact will be made by the Club to an Employer (Reference Only)

Have you previously applied to join a rifle or pistol club? YES/NO
Please give Club name and contact address:.....
.....
Period of membership..... Reason for leaving.....
Do you hold a) a Shotgun Certificate? YES/NO: b) a Firearm Certificate? YES/NO
If yes give number(s):.....
Issued by :Constabulary
Have you ever been refused a shotgun or firearm certificate?YES/NO
If yes please state reasons:.....
Is there any medical reason why you might be refused a Firearm Certificate?
Please state (in confidence).....
Sponsoring Member of Bury Pistol Club:.....

Please supply 4 passport sized current photos with you application ensuring that one is signed and printed on the reverse

A copy of the Club Constitution is available for inspection in the Clubhouse

-----FOR OFFICIAL USE ONLY-----

Date.....

Membership approved / declined Membership Number.....
Chairman..... Secretary.....

Bury St Edmunds Pistol Club

OPEN DAY GUEST FORM

AND DECLARATION FOR THE PURPOSE OF POLICE REFERENCE

I hereby declare that I am NOT barred from shooting under SECTION 21 of the FIREARMS ACT, 1968, (and subsequent amendments). I also declare that I will follow ALL safety instructions given by my host whilst under supervision on the Firing Point.

Please read the notes below before signing.

You will not be allowed to shoot if you have been sentenced to *PRISON* or *YOUTH CUSTODY* for *THREE MONTHS* up to *THREE YEARS*. The ban is *FIVE YEARS* from the date of release. If the sentence exceeded *THREE YEARS*: the ban is for LIFE.

An Offence will be committed by your Host if he LOANS firearms and/or ammunition to someone so barred.

If you are unable to sign, for ANY reason, the Club regrets you will NOT be allowed to shoot.

The Club is required to advise the Police when Open Days occur. They have and will do checks.

Signed:

Print Name:.....

Date:

Address:

.....

Contact Telephone Number :

This Declaration must be returned in good time to allow time for all the proper checks to be undertaken and also for a member to be allocated for supervision.

Please contact the secretary to arrange a visit.