

# ASSOCIATION OF MALTESE ARMS COLLECTORS & SHOOTERS

AMACS, 83 Triq l-Oratorju, Naxxar NXR 2504 - Tel/Fax: 2141 1600 - E-mail: info@amacs-malta.org - Website: www.amacs-malta.org



Applicant No: \_\_\_\_\_

## ENROLMENT FORM 2010-01

Member No: \_\_\_\_\_

### 1. Applicant's Details & Declaration



Name: ..... Member No: .....

Address: ..... ID No: .....

..... Postcode: .....

Home Tel: ..... Office Tel: ..... Date of Birth: .....

Mobile No: ..... Fax No: ..... E-Mail: .....

Employer: ..... Occupation: .....

I, the undersigned, hereby apply to join AMACS and the Clubs indicated above. My application form is accompanied by an original copy of a Police Criminal Record Certificate (Fedina Penali), two passport-sized photographs, a non-refundable application fee of € 15.00 plus payment as listed in section 2. I agree and accept that the AMACS Committee's decision is final and that I shall not contest it in the event that my application is refused. I agree and accept that if accepted I shall initially be granted probationary membership which may be terminated unless I attend the required minimum of AMACS Club events and/or successfully pass any tests deemed necessary for my membership. As a member of AMACS I shall abide by the terms of Association's statute and policies established by the Committee. I agree and accept that the Committee shall process and file my details in accordance with the Data Protection Act and that I shall notify the Committee in the event of any changes in my personal details.

.....  
Signature

.....  
Date

### 2. Club Registration & Annual Fee

1. ENROLMENT FEE – ONE TIME ONLY	<b>AMACS</b>	€ 15.00	<input checked="" type="checkbox"/>	<b>€ 15.00</b>
2. ASSOCIATION OF MALTESE ARMS COLLECTORS & SHOOTERS	<b>AMACS</b>	€ 15.00	<input checked="" type="checkbox"/>	<b>€ 15.00</b>
3. MALTA ARMS & MILITARIA SOCIETY	<b>MAMS</b>	€ 5.00	<input type="checkbox"/>	_____
4. MALTA RIFLE & PISTOL SHOOTING CLUB	<b>MRPSC</b>	€ 10.00	<input type="checkbox"/>	_____
5. MALTA MUZZLE-LOADER SHOOTING CLUB	<b>MMSC</b>	€ 5.00	<input type="checkbox"/>	_____
6. MALTA AIRGUN SHOOTING CLUB	<b>MASC</b>	€ 5.00	<input type="checkbox"/>	_____
7. MALTA TACTICAL AIRSOFT CLUB	<b>MTAC</b>	€ 5.00	<input type="checkbox"/>	_____
8. MALTA CROSSBOW SHOOTING CLUB	<b>MCSC</b>	€ 5.00	<input type="checkbox"/>	_____
9. MALTA CLAY PIGEON SHOOTING CLUB	<b>MCPSC</b>	€ 5.00	<input type="checkbox"/>	_____
10. <b>OR SELECT ALL OF THE ABOVE CLUBS AND SAVE € 10</b>		<b>€ 60.00</b>	<input type="checkbox"/>	_____
11. Insurance Cover fee: Third Party Liability (required to participate at ranges)		€ 10.00	<input type="checkbox"/>	_____
12. Insurance Cover fee: Personal Accident (optional)		€ 5.00	<input type="checkbox"/>	_____
Total payment enclosed:	Cash / Cheque (No.) _____			_____

### 3. General Medical Practitioner's Referral

I hereby certify that the applicant is known to me as a person of sound moral character who is in a state of good mental health.

Name: .....

Date: .....

Stamp & signature

### 4. Proposer & Seconder Declaration

We hereby declare our support for this application we confirm that we have both been AMACS members for at least one year.

Proposed by: .....

Member No: .....

Signature: .....

Seconded by: .....

Member No: .....

Signature: .....

### 5. Committee Approval / Rejection

Approved  Rejected

Official: .....

Date: .....

Signature: .....



Applicant No:

## ENROLMENT FORM 2010-01 (part 2)

Member No:

### 7. Additional Information

**A. Describe your interests and activities in a few words and fill in the rest of this section if applicable:**

**B. Do you already have a Police Firearm Licence?**  NO  YES

*If reply is YES then please fill in the information in (C) below.*

**C. What Police Firearm Licences /Permits did you have under the old Arms Ordinance?**

- |      |  |                          |                |                          |          |
|------|--|--------------------------|----------------|--------------------------|----------|
| i.   | Article 22 - Antique, Rare or Artistic Firearms            | <input type="checkbox"/> | To Keep        |                          |          |
| ii.  | Article 3 - Muzzle Loading                                 | <input type="checkbox"/> | To Keep        | <input type="checkbox"/> | To Carry |
| iii. | Article 3 - Airguns  | <input type="checkbox"/> | To Keep        | <input type="checkbox"/> | To Carry |
| iv.  | Article 3 - Shotguns                                       | <input type="checkbox"/> | To Keep        | <input type="checkbox"/> | To Carry |
|      | If Shotgun Licence (iv) was issued 'To Carry' state is for | <input type="checkbox"/> | Clay Pigeon or | <input type="checkbox"/> | Hunting  |

**D. What Police Firearm Licences do you have under the Arms Act 2005?**

- |      |                        |   |                          |
|------|------------------------|---|--------------------------|
| i.   | COLLECTOR LICENCE      | A | <input type="checkbox"/> |
| ii.  | COLLECTOR LICENCE      | B | <input type="checkbox"/> |
| iii. | TARGET SHOOTER LICENCE | A | <input type="checkbox"/> |
| iv.  | TARGET SHOOTER LICENCE | B | <input type="checkbox"/> |

***Please submit a copy of the last paid-up Police Licences and a copy of your Insurance policy if applicable!***

I hereby declare that the information submitted is true and correct.

Applicant' Signature: .....

Date: .....

Official Use only :



Thank you for submitting your application to join AMACS. Please check whether you have entered all the information requested. Contact details (telephone, mobile phone numbers and e-mail) are essential for good communication. Your application will be treated within the shortest time possible. Please keep this receipt in a safe place.

The Committee