



ASSOCIATION OF MALTESE ARMS COLLECTORS & SHOOTERS

Founded 12th June 1985



Applicant No: _____

JUNIORS ENROLMENT FORM 2023

Member No: _____

1. Applicant's Details & Declaration



Name: ID No:

Address: Date of Birth:

..... Postcode: Place of Birth:

Home Tel: Office Tel: Mobile No:

E-Mail: Date:

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 Conduct Certificate, 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 Committees' decisions are final and that I shall withdraw my application is refused. If approved, I accept to be granted probationary membership which may be terminated if I do not attend the required minimum of club events and/or successfully pass any tests deemed necessary for my membership. Once a full member I shall abide by the terms of the statutes and rules as established by the committees. I consent to my personal details being stored in accordance with the GDPR and that I shall notify the Committee in the event of any changes in my personal details.

Signature

2. Club Registration & Annual Fee

1. ENROLMENT FEE – ONE TIME ONLY	AMACS	✓	€ 5.00
2. ASSOCIATION & ALL CLUBS	AMACS	✓	€ 5.00
TOTAL FOR JUNIOR MEMBER			€ 10.00

Total payment enclosed: Cash / Cheque (No.) _____

3. Parents and/or Legal Guardian's Consent

We hereby declare that we find no objection to this application

Name: ID Card No.: Relation to applicant: Signature:

Name: ID Card No.: Relation to applicant: Signature:

4. Committee Approval / Rejection

Approved Rejected Official: Date: Signature:

5. Additional Information

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

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

Applicant's Signature: Date:



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.

