Registered Shooting Competition Participants

WESTERN AUSTRALIA POLICE FORCE
LICENSING SERVICES
FirearmClubsandRanges@police.wa.gov.au
Telephone: 1300 171 011

This document is to be completed by a licensed firearm club and sumbitted within 7 days after the day a registered shooting competition occurs

COMPLETE FORM IN CAPITAL LETTERS

Club Details

Club Name					
Association Details *If applicable*					
Contact Name		Contact Position/ Role		Club Contact Phone	
Email				Mobile Phone	
Unit / Lot / Level		Street Number		Street Name	
Street Type		Suburb		State	Postcode

Range Details

Range Details		Completed on date	
Discipline description			

Participants

Full Name	Date of Birth	Firearm Authority Number

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Sign in Register

Full Name	Date of Birth	Firearm Authority Number

Declaration

Full Name

Club Officer Signature

Position / Role

Date