

[Office use only please: date _____ membership # _____]

ORA/DCRA NEW (PROBATIONARY) MEMBER FORM, 2010-2011

Please read the notes that accompany this form, which covers the membership year from 1st April 2010 to 31st March 2011. The fees shown on the form will also cover new members who join before 1st April 2010. Memberships paid via this form will expire on 31st March 2011.

PLEASE PRINT ALL INFORMATION CLEARLY.

THIS FORM IS ONLY TO BE USED FOR NEW MEMBERSHIPS

Surname: _____ Mr/Mrs/Miss/ Rank/Title _____ Initials _____

Full mailing address (including apartment number, P.O. Box, if applicable): _____

City/Town and Province: _____ Postal Code _____

Phone No. (home): _____ Phone No. (work) (optional): _____

FAX # (optional): _____ Cell Phone No. (optional): _____

e-mail (recommended but optional): _____

Firearms Licence # and expiry date: _____
(mandatory for active shooting members) (yyyy - mm - dd)

MALE _____ / FEMALE _____ (check)

Please check what your age is on April 1, 2010 (those under 25, and 65 or over, are eligible for lower fees): Under 18 __ Under 19 __ Under 23 __ Under 25 __ Under 35 __ 65 or over __ Other __

If you are UNDER 25 on April 1, 2010, please give your date of birth: _____

Please check each of the following categories that applies: Civilian ____; Cadet ____; CF Regular ____; Primary Reserve ____; Ready Reserve ____; Supplemental Reserve ____; Ex-member CF ____; Police ____; C.I.C. ____

Please also check each of the following that applies: Member Swiss Rifle Club ____; Member SFC ____; Member CSSA (OHA) ____; Member BB R&G Club ____

Please check your shooting discipline(s) of interest: Target Rifle ____; Service Rifle ____; Precision (Sniper) Rifle __; Black Powder Rifle __; Historical Military Rifle __; ISSF (ISU) ____; F Class ____; Handgun ____; Other (please indicate) _____

(..... turn over, please)

Please provide the names and full mailing addresses, including postal codes, of at least two people who will be contacted by the ORA and who would be prepared to act as references for you. Your membership application cannot be approved without these references.

1. _____

2. _____

Declaration: I hereby apply for membership for 2010-2011 in the ORA and DCRA. I certify that I have never previously been a (non-cadet) member of the ORA or DCRA. I agree to abide with all the current regulations concerning the operations of the ORA and DCRA. I understand that my membership is not valid until it has been approved by the ORA and until my 2010-2011 ORA membership card has been issued.
 signed: _____ date: _____

		<u>Tick</u> <u>the type</u> <u>you want</u>	<u>and enter the</u> <u>the Fee</u> <u>to be paid</u>
1) Membership			
A) Annual membership			
Probationary Basic ORA Membership (includes Liability Insurance and ORA Activity Fee)			
[deduct \$30 if 65 or over; deduct \$65 if under 25]	\$140	_____	_____
Probationary ORA Membership with Associate DCRA			
[deduct \$30 if 65 or over; deduct \$65 if under 25]	\$165	_____	_____
Probationary ORA Membership with Full DCRA			
[deduct \$30 if 65 or over; deduct \$105 if under 25]	\$240	_____	_____
B) One Day Guest Fee	\$45	_____	_____
[payable up to 4 times, includes liability insurance - after 4 times, becomes paid up Basic Membership, references must be submitted]			
C) Contact Membership (no shooting, no references required) with			
"The Canadian Marksman"	\$70	_____	_____
On its own (no DCRA)	\$35	_____	_____

Life and other types of memberships are available. Please see the Notes and/or ask for details.

2) **DONATION FOR 2010** (please refer to the notes that accompany this form - if you are making a donation and want an official receipt for tax purposes, please make your cheque payable to "DCRA".)

_____ \$ _____

TOTAL PAYMENT ENCLOSED \$ _____

Please make sure that all parts of this form are completed and send it with payment, in Canadian funds only, with cheque payable to "ORA" (see note on "Donations" above), to: ORA, PO Box 2076, Thornton, Ontario, L0L 2N0