

NATIONAL RIFLE
ASSOCIATION

## NRA/ARA Adaptive Championships - Registration Form

Thursday $22^{\text {nd }}$ June 2023

| Full Name: |  |  | Contact No: |  |
| :---: | :---: | :---: | :---: | :---: |
| Email Address: |  |  |  |  |
| Address: |  |  |  |  |
| Serving: | $\square$ Royal Navy | $\square$ Royal Air Force | $\square$ Army |  |
| Veteran: | $\square$ British Forces |  | $\square$ Overseas Forces |  |
| Are you entering as an Individual or as part of a Group? |  |  |  | Ind / Org |
| If Group, please state which: |  |  |  |  |
| Dietary Requirement: |  |  |  |  |
| I am a member of the military (including reserve forces), police or other emergency services |  |  |  | Yes / No |
| I am a former member of the military (including reserve forces), police or other emergency services |  |  |  | Yes/No |
| I am a Cadet member of a Cadet Force |  |  |  | Yes/No |
| I am a Staff/ Volunteer member of a Cadet Force |  |  |  | Yes/No |

DECLARATION: All competitors will be required to sign this declaration on the day, before shooting commences:

- I am not a prohibited person within the meaning of Section 21 Firearms Act 1968
- I have never had a Firearm or Shotgun Certificate refused or revoked. (If you have, please enclose full details in a sealed envelope marked 'Confidential')
- On the first day of the competition I will be aged fourteen years or over
- I agree to abide by the rules of the National Rifle Association and of the Meeting and I will accept the decisions of the Meeting Director or the NRA as final
- I agree that I have been warned that ear and eye protection must be worn at all times in the vicinity of all firing points while shooting is in progress, and shall not hold the organiser responsible for any injury resulting from noncompliance therewith
- I agree that my name and score may be published on the internet or elsewhere following this competition


## I declare the above to be true and accurate

## Signed

$\qquad$ Dated $\qquad$

FUNDING MILITARY SPORT \& ADVENTURE

