

ADELAIDE INDOOR  
FIREARMS ASSOCIATION



**DECLARATION**

**FOR THIS APPLICATION TO BE ACCEPTED AND CONSIDERED, YOU MUST COMPLETE AND SIGN THIS DECLARATION.**

I, ..... AM SEEKING TO JOIN ADELAIDE INDOOR FIREARMS ASSOCIATION AND USE ITS FACILITIES FOR THE SOLE PURPOSE OF PARTICIPATING IN THE LAWFUL ENJOYMENT OF THE ACTIVITIES ORGANISED BY THE CLUB AND ITS EXECUTIVE.

I AGREE AND ACCEPT THAT I MUST REMAIN AN AIFA MEMBER FOR A MINIMUM OF 12 MONTHS.

I AGREE AND ACCEPT RESPONSIBILITIES UNDER THE **FIREARMS ACT OF SOUTH AUSTRALIA** AND ANY OTHER LAW PERTAINING TO THE SAFE AND RESPONSIBLE USE AND OWNERSHIP OF FIREARMS.

I AGREE AND ACCEPT THAT THE CLUB EXECUTIVE CAN REQUIRE FURTHER INFORMATION IN WRITING FOR THE PURPOSE OF PROCESSING THIS APPLICATION.

I STATE THAT I AM NOT OR HAVE NOT BEEN SUBJECT OF ANY COURT ORDER PREVENTING ME FROM POSSESSING OR OPERATING FIREARMS WITHIN ANY JURISDICTION (AUSTRALIA OR OTHERWISE) THAT I HAVE RESIDED IN. NOR HAVE I HAD A FIREARMS LICENCE CANCELLED OR REVOKED WITHIN ANY JURISDICTION (AUSTRALIA OR OTHERWISE) THAT I HAVE RESIDED IN,

I STATE THAT I AM NOT RECEIVING OR UNDER MEDICAL SUPERVISION FOR REASONS THAT WOULD PRECLUDE ME FROM SAFELY OPERATING OR POSSESSING A FIREARM.

I ACCEPT THAT THE EXECUTIVE MAY REJECT MY APPLICATION WITHOUT PREJUDICE OR DETAILING THE REASONS FOR ITS REJECTION.

**SIGNATURE:** ..... **DATE:** .....

**WITNESS:** ..... **SIGNATURE:**.....



**FACILITIES**

**ALL WEATHER / TIME OF DAY FACILITIES.**

**AUTOMATED TARGET SYSTEMS.**

**ACCESS TO RANGE INSTRUCTORS AT ALL TIMES.**

**ON SITE FIREARMS DEALER.**

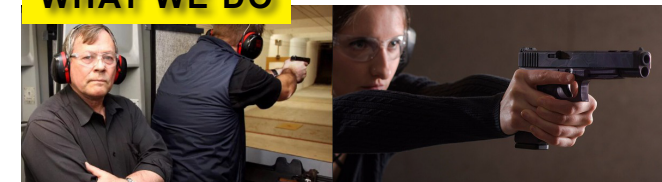
**FIREARMS STORAGE (AT COST).**

**AMMUNITION RELOADING SERVICES.**

**CENTRE OF THE CITY CONVENIENCE.**

- Established in 1994.
- Purpose to provide a convenient and modern facility for licenced persons to enjoy Club Activities.
- Focused on ensuring high levels of support for persons wishing to gain and maintain their firearms licence for Club Activities.
- Promoting the continued lawful ownership and responsible use of firearms within the firearms community.

**WHAT WE DO**



**AIFA PROVIDES:**

- Organised Club matches for licencing purposes in S.A
- Training for firearms licences for club activities.
- Regular club functions that promote a social and friendly environment.



# JOINING AIFA

## ADELAIDE INDOOR FIREARMS ASSOCIATION

1. Apply for a Firearms Licence at your local police station with the endorsements A1, B1 and H1.
2. Attend your local Police Station with 100 points of ID.
3. Complete the Firearms Licence Application form (PD303).
  - H1 Handgun Club Use.
  - A1 & B1 Rifle and Shotgun Club Use.
4. Wait for the letter from the Police approving you to hold a Club licence (This takes a minimum of 28 days).
5. Acceptance of new members will require to produce 2 written references; and a criminal history report (such as a National Police Certificate) relating to the person provided by South Australia Police or the ACC.
6. Once you have received Police approval to hold a Club Licence, National Police Clearance, and 2 written references; complete the application form and return the documents to AIFA.
7. Pay the \$320 up front fee for A1, B1 and H1 training.
8. Commence training with AIFA.
  - 1 X theory lesson
  - 7 X practical lessons
  - Lessons include course booklet and SAPOL exam to be completed.
9. Complete the Club training course. The Club documentation is then sent to SA Police. and a temporary licence will then be sent to you.
10. Go to Services SA and pay the licence fee and have your photo taken. Your paper licence together with the receipt will be your temporary licence until you receive your photo licence in the mail.
11. Direct debit of \$46 per month commences.
  - This includes:
  - AIFA Membership.
  - Unlimited range hire and firearm hire in club times.
12. Commence normal Club activities as an Ordinary AIFA Member.

\*\*\* IMPORTANT \*\*\*

**YOU MUST MAINTAIN YOUR MEMBERSHIP WITH A CLUB AND COMPLETE A MINIMUM 6 COMPETITIVE SHOTS TO MAINTAIN THIS LICENCE.**

**OTHER CONDITIONS APPLY.** Please ask Range Officers if you have any further inquiries.

### ADMINISTRATION USE ONLY

Member No.	Application Fee:	Approval Letter:	Assessment Book:	PD314 Issued:
Application Date:	Membership Fee:	Bill Buddy Form:	Membership Card:	Training Completed:
National Police Certificate:	2 References:	Photo ID:		

### ADELAIDE INDOOR FIREARMS ASSOCIATION ORDINARY MEMBERSHIP APPLICATION FORM

### PERSONAL DETAILS

FAMILY NAME		D.O.B	
FIRST NAME		MIDDLE NAME	
ADDRESS			
SUBURB		POSTCODE	
MOBILE NO:			
HOME NO:			
E-MAIL:			
	Do you wish to receive promotional materials? Yes <input type="checkbox"/> No <input type="checkbox"/>		
OCCUPATION:			
EMPLOYER:			

### IDENTIFICATION

TYPE:		NUMBER:	
IF A FIREARMS LICENCE, PLEASE IDENTIFY CLASSES:			
A	B	C	D H
			EXPIREY DATE:

### REFEREES

2 written references each signed by a person within the preceding 60 days and to state that the person has known the applicant for at least the preceding 2 years and that the applicant is a person of good character and a suitable person to be a member of a firearms club.

**Sighted by:** \_\_\_\_\_ **Signature:** \_\_\_\_\_