



WEST BENGAL RIFLE ASSOCIATION

Email: wbra19@yahoo.com
10 Meherali Road, Kolkata - 700 017,

SHOOTER’S REGISTRATION FORM

Registration fees: 350/- (Rupees Three Hundred Fifty) only

- 1) Shooter’s Name :
- 2) Mother’s Name:
- 3) Father’s Name :
- 4) Gender : Male / Female
- 5) Date of Birth :
- 6) Discipline : Pistol / Rifle / Gun / All
- 7) Representing Unit / Club :
- 8) **Shooter’s** Address:
- 9) **Shooter’s** email ID & Contact details :
- 10) **Shooter’s** T-shirt measurement: **S / M/ L / XL / XXL / XXXL** (Tick one)

PHOTO

I am hereby confirming that all the above stated information are correct and true to the best of of my knowledge.

I hereby declare that till date I am not a registered shooter under WBRA with any of its affiliated unit and once registered I will abide by all the rules and regulations prescribed and / to be formulated / amended time to time, as long as long I remain a registered shooter under West Bengal Rifle Association.

Countersignature of Guardian
(In case of the shooter under 18 years of age)

Signature of the Shooter

Signature & seal of Secretary/ President/ Authorised person of representing Club/ unit

For Office use only

- 1) Approved/ Not Approved
- 2) ID no assigned:
- 3) ID Card issued:

Signature of the Secretary General of WBRA