

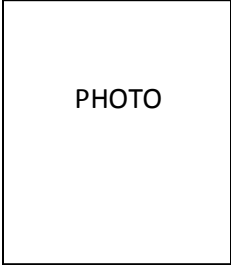


WEST BENGAL RIFLE ASSOCIATION

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

SHOOTER'S REGISTRATION FORM

- 1) Shooter's Name :
(In block letters)
- 2) Gender: M / F
- 3) Mother's Name:
- 4) Father's Name :
- 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)



I am hereby confirming that all the above stated information are correct and true to the best of of my knowledge. I shall abide by all the rules and regulations formulated by 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 of representing Club/ unit

- If a shooter is a member of more than one club / unit, he / she should compulsorily submit NOC from other club / unit, other than the one he / she wishes to represent.

For Office use only

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

Signature of the Secretary General of WBRA