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Manitoba

Provincial

Handgun

Association

Email: mbhndgn@shaw.ca

INDIVIDUAL MEMBERSHIP APPLICATION

APPLICATION DATA:

Full Name: _____ Age: _____ M/F _____

Address: _____

City _____ Province/State: _____

Postal/Zip Code: _____

Telephone: Home: () _____ Bus: () _____

e-mail: _____

Affiliated Club: _____

MEMBERSHIP FEES: (includes G.S.T.)

___ \$10.00 Individual

___ \$25.00 Club

Be assured that all personal information provided is held in confidence by the MPHA as per Confidentiality Guidelines. Sport Manitoba requires certain information (age and gender, no names) for their Demographic profile. While financial support is limited to a small lotto benefit, our insurance coverage depends on their satisfaction of this requirement.

SIGNATURE

Applicant Signature: _____

Date: _____

Please forward with payment (cheque or money order) to:

Manitoba Provincial Handgun Association
Box 314, RPO Corydon Avenue
Winnipeg, Manitoba
R3M 3S7