



FILIPINO PRACTICAL SHOOTING CLUB

Civil I.D. Size
Photo

I.D. NO. _____

MEMBERSHIP APPLICATION FORM

SURNAME		GIVEN NAME		MIDDLE NAME
CIVIL I.D. NO.	GENDER	NATIONALITY	DATE OF BIRTH	E-MAIL ADDRESS
KUWAIT ADDRESS				

HOME (KUWAIT) PHONE NO.			MOBILE NO.	
EMPLOYER'S NAME & ADDRESS				

PROFESSION			OFFICE PHONE NO.	
HOME COUNTRY ADDRESS				

HOME COUNTRY PHONE NO.			MOBILE NO.	
SPONSORED OR RECOMMENDED BY				
<u>NAME</u>		<u>FPSC POSITION</u>		<u>PHONE NO.</u>
IN CASE OF EMERGENCY, PLEASE CONTACT				
<u>NAME</u>		<u>ADDRESS</u>		<u>PHONE NO.</u>
<i>I hereby certify that the above information is true and correct to the best of my knowledge.</i>				
_____ SIGNATURE			_____ DATE	

FOR OFFICIAL USE ONLY. Please do not write below this line.		
REMARKS / COMMENTS		FILE NUMBER
		<input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED
RECORDED : _____ President		_____ Membership Committee Chairman