



United Kingdom Practical Shooting Association Renewal Form For Lapsed Members

**ONLY COMPLETE THIS FORM IF YOUR UKPSA MEMBERSHIP HAS
LAPSED BY MORE THAN 1 YEAR**
PLEASE COMPLETE IN BLOCK CAPITALS (except email address)

Full name _____
UKPSA Membership Number: _____
Address _____

County _____ Post Code _____ email _____
Home Tel _____ Work Tel _____ Fax _____

State why your membership to the UKPSA was allowed to lapse. _____

State why you wish to renew your UKPSA membership _____

When is your FAC renewal due? _____

If your membership is renewed do you agree to:-
Support the UKPSA Yes / No
Support the UKPSA as the IPSC Regional Directorate of Great Britain. Yes / No
Abide by the UKPSA Constitution and Byelaws Yes / No
Pay your annual subscription by Direct Debit Yes / No

Signature: _____ Date: _____

Please submit this form to the UKPSA Membership Secretary. Your application will be considered by the UKPSA Council. If your renewal is accepted you will be advised of how to set up direct debit payments. You may also be required to submit an up to date photo and copies of your FAC, SGC or a reference.

Please return this completed form to:

**Membership Secretary, UKPSA,
PO Box 7057,
Preston, Weymouth,
Dorset, DT4 4EN**