

# Maharashtra Rifle Association

MRA Shooting Ranges, Worli sea face, north Mumbai-400 030  
Tel. 022 2432736/24930064  
PRIVATE & CONFIDENTIAL

**1. Name of Applicant:**

Address:

Tel/E-Mail Id:

**2. Qualification: SSC/ HSC/ Graduate/ Post Graduate/ Other Qualifications**

a. Name of school:

Address:

b. Name of college:

Address:

(Attach self attested copy of the mark sheet & certificates)

**3. Brief Details of Business/Profession/Job:**

(Describe In 25-60 Words)

(In case of junior/student enter details of parents/guardian and attach business/visiting card)

Monthly/Yearly Income:

**4. Detail of family member staying with the applicant**

NAME	AGE	OCCUPATION DETAIL	RELATION
1.			
2.			
3.			
4.			
5.			
6.			

**5. 1) Whether Arms License Is Applied? Yes / No**

If Yes, When To Whom And Result:

2) Whether Application Is Pending Or License Was Granted /Rejected:

3) Details Of Arms License.

: No:

Issued By:

Valid Up to:

4) Details of Arms

: Revolver/ Pistol /Shot Gun / Rifle

Sr. No:

Caliber:

**6. Details of arms license and weapon possessed by each above mentioned members:**

(Attach self attested copy of the Arm License of self & parents/ guardians if any)

**7. Experience In Using Firearms:**

Details Of Course Attended In Handling Of Guns:

**8. Details of other sports activities if any:**

**9. Other Information:**

Applicant Signature

FOR OFFICE USE

Date:

Time:

Comments of MRA office bearer:

Membership Approved/ Rejected:

Signature of MRA Officials: