

2026 SAFGA Membership Application Form

(please tick)



- Central Field & Game; PO Box 45, St Agnes SA 5097
- Lake Bonney Sporting Clays; PO Box 481, Millicent SA 5280
- Rocky Gully Sporting Clays; PO Box 222, Welland, SA 5007
- South East Field & Game; PO Box 1438, Mt Gambier SA 5290

Name:.....DOB:
Home Address:Post Code:
Postal Address:Post Code:
Phone: Hm:Wk.:Mob:..... Email:
.....

Firearms Licence: Licence Expiry:

Classes: (circle) A 1, 2, 3, 4, 5, 6, 7, 8, 9
B 1, 2, 3, 4, 5, 6, 7, 8, 9
C 1, 2, 3, 4, 5, 6, 7, 8, 9

Please tick which membership you wish to apply for:

Open Male / Female	\$150.00
Pensioner Male / Female	\$130.00
Senior Partner / Spouse	\$110.00
Junior U/18	\$95.00

I hereby declare that I am not subject to any court order prohibiting possession or use of a firearm, and have not had a personal firearms license cancelled or revoked in any State or Territory of the Commonwealth of Australia

SIGN:

Note: There may be a pending period of up to sixty days for clubs to perform checks as required by SA Firearms Regulations.

Contact Details for membership: membership@safga.org.au or ph. no.0438381255

Membership Application Continued...

REFEREE 1

Character Referee – Full Name:

Character Referee Address:
.....
.....

have known

(Full Name of Applicant)

for at least two years prior to this day and consider this person to be of good character and a suitable person to be a member of a Firearms Club.

Signed..... Date:

Telephone..... Mobile:.....

REFEREE CONTACTED AND CONFIRMED Date:

Name (Print): Signed:.....

Position in Club:.....

REFEREE 2

Character Referee – Full Name:

Character Referee Address:
.....
.....

have known

(Full Name of Applicant)

for at least two years prior to this day and consider this person to be of good character and a suitable person to be a member of a Firearms Club.

Signed..... Date:

Telephone..... Mobile:.....

REFEREE CONTACTED AND CONFIRMED Date:

Name (Print): Signed:.....

Position in Club:.....