

United Kingdom Airsoft Retailers Association

Address

Over 18 only

UKARA Player Application – Please make sure all details have been written clearly and are legible.

Full Name:						htt
Address:						Ď.
Town:						3
Postcode:						Ş
Email address:					(write clearly)	\{
Re-confirm Email, (CAPITALS):					(write clearly)	
Contact phone number:						7
Player site membership no:						
Name of the game site:			•			
(where membership is held)						<u>a</u>
Player Agreement:	Airsoft war game accurate and co game site, and t liability insurance	es ("skirmishes" *Home (errect. I confirm that I hold	Office definition*), a I a current and acti hold, to the best of	and that the deta ve membership f my knowledge	ails on this form are with a UKARA approved , a minimum of third party	p://www.ukara.org.uk
Signature:						
Player Name, (CAPITALS):						
Date of Birth:						
(DD/MM/YYYY)						
Application date:						
(DD/MM/YYYY)			•			
					UKARA game site s	tamp
Site Agreement:	who holds a me	me site official I confirm t mbership at this site, the .RA should this situation	number of which is	s clearly printed	above. I will notify a	
Site Signature:						
Name, (CAPITALS):						
Membership Start Date:						
(DD/MM/YYYY)						
(,						
	Passport	Drivers License	Birth Cert.	Utility Bill	Members Card	Other
ID						