

# PARENTAL CONSENT FORM – SHOOTING ACTIVITIES

PLEASE NOTE: SPECIFIC PARENTAL PERMISSION IS NEEDED BEFORE A YOUNG PERSON CAN TAKE PART IN THIS ACTIVITY.

(All courses are run in accordance with Scout Association Rules)

The upper section of this form is to be completed by the leader in charge of the activity.

The lower section is to be completed by the parent or legal guardian and returned to the Leader.

**NOTE THE DECLARATION REGARDING THE FIREARMS ACT 1986 SECT: 21 AT THE FOOT.**

Name of Group: 4<sup>th</sup> Itchen South (Netley) Sea Scouts

Proposed activity

(Please tick [ ✓ ] the appropriate box)

.177 Air Rifle  NSRA Training Course  Clay pigeon shooting  Archery

Other (please specify) .....

Dates: **1<sup>st</sup> January 2013 – 31<sup>st</sup> December 2013**

Start times: As advertised

Finish times: As advertised

Cost: n/a

Cheque payable to: n/a

Location of course: Scout and Guide Hall, Netley Abbey

Is transport required NO

Home Contact Number: - n/a

Additional information .....

Leader: Kevin Earl NSRA Club Air Gun Instructor, Aaron Lush NSRA, Duncan Matthews NSRA  
Jan Barfoot NSRA Club Air Gun Instructor. Martin Lush NSRA

Leaders qualification: NSRA Youth Tutor

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## Parent's or guardian's consent

I have noted the arrangements and give permission for .....  
(Name of young person – BLOCK CAPS)

to take part in ..... air gun (rifle and pistol) target shooting ..... (activity proposed above)

Please state if your son/daughter/ward has a disability or condition, which may be affected by the activity:  
.....

Please indicate details of any medical treatment he/she is receiving at the moment:  
.....

Contact details .....  
(Your home and mobile telephone numbers )

I confirm that my son/daughter/ward is NOT subject to a banning order under section 21 of the Firearms Act 1986.

Name ..... Signature ..... Date .....