



1st HARTFORD SCOUT GROUP

Shooting Consent Form



EVENT: _____ DATE OF EVENT: _____

PARENTAL CONSENT FORM FOR AIR RIFLE SHOOTING

Group Name: _____

Group Leader: _____

PARENT OR GUARDIAN'S CONSENT

I have noted the arrangements and give permission for: _____
(Name of child to take part in air rifle shooting at the event above.)

I also declare that they are not prohibited from possessing, handling or firing airguns by virtue of the regulations set out in Section 21 of The Firearms Act 1968

Extract from 'The Firearms Act 1968'

SECTION 21 Prohibits the possession of a firearm and ammunition (under any circumstances), by any person who has been convicted of a crime and sentenced to a term of imprisonment (or its equivalent for young person's) of 3 months or more. The prohibition applies in all circumstances, including handling and firing at an approved shooting club or at a clay pigeon shoot where a certificate is not ordinarily required. It also applies to the possession or use of other categories of firearms and ammunition such as AIRGUNS or shotgun cartridges for which a certificate is not needed. A sentence of 3 months to 3 years attracts a 5-year prohibition, shorter ones no prohibition but a longer one means a life ban.

Please indicate if your child has a disability or condition, which may be affected by this activity: **Yes/No**
Delete
As Required

Details:

Parent/Guardian's

Name: _____

Signature: _____ Date: _____