#### Sign, date, and return all pages via US Mail with check for \$75.00 payable to BRPC

Ρ	ER	SON	AL	HIST	ORY	FORM
•						

NAME:				
	Last	First		
Address:				
	Street nan	ne and number		
	City	,State	Zip code	
Telephone N				
	Cel	l	Home	
Email Addres	SS:			
Rank at retire	ement:		_	

Do you have any disabilities which prohibit you from kneeling or shooting from a kneeling position at the range? () Yes () No

Identify the weapon you intend to use to qualify (select only one )

() Semi-Automatic Pistol

() Revolver

A clear and legible copy of your current Delaware drivers license and retirement ID are to be submitted with this form to be considered for the LEOSA Qualification program.

Printed Name of Retired/Separated Officer

Signature

Date

# RELEASE AND INDEMNITY AGREEMENT GENERAL RANGE & PERSONNEL RELEASE

Date

I, \_\_\_\_\_\_, for the consideration of being permitted to use the Bridgeville Rifle & Pistol Club, Ltd. facilities do hereby release and forever discharge the RANGE OFFICER/s, and the Bridgeville Rifle & Pistol Club, Ltd., their heirs, executors, administrators, agents, employees, and assigns from any and all claims I might have against them arising out of any injuries or damages I might sustain while using said range or instruction facilities. I acknowledge that this is a full and complete release of any such claims.

I also agree to abide by and adhere to the same rules and regulations for the use of the range facilities that members and range personnel are required to follow.

#### (PISTOL) or (REVOLVER)

Only circle the **ONE** weapon you plan to carry.

Because of the number of retirees qualifying, ONLY ONE WEAPON will be fired and a permit issued for that specific weapon (pistol or revolver). We are no longer issuing a permit for two different handguns.

Printed Name of Retired/Separated Officer

Signature

#### **RELEASE AND WAIVER FORM**

I am a separated officer of the \_\_\_\_\_\_ (agency name) who is eligible to qualify to carry a concealed firearm, pursuant to the Law Enforcement Safety Act of 2004/S.1132 Law Enforcement Officers Safety Act Improvements Act of 2010 (18 U.S. Code 926C).

I recognize that the Bridgeville Rifle and Gun Club is not legally required to provide me with a firearm qualification course or firearms instruction.

I understand that should the BRIDGEVILLE RIFLE AND GUN CLULB provide me with firearms instruction, I will be required to fire my weapon under the direct supervision of a Delaware Approved Law Enforcement Firearms Instructor.

I agree to indemnify and hold harmless any Range officer, the Bridgeville Rifle and Gun club, or its agents and employees, for any injury caused by my participation in the qualification process. I further waive any claim for damages against those identified, or its agents and employees, for any injury suffered by me while participating in the qualification process.

Further, I hereby specifically agree to indemnify and hold harmless the BRIDGEVILLE RIFLE AND GUN CLULB, and//or its officers and employees, from any and all liability resulting from my carrying and/or use of an weapon allowed under the Law Enforcement Officers Safety act of 2004/S 1132 Law Enforcement Safety Act Improvements Act of 2010 (18 U.S. Code 926C), including, but not limited to civil litigation. The BRIDGEVILLE RIFLE AND GUN CLULB assumes no liability by issuing this authorization.

Retired personnel are reminded that, as retired law enforcement officers, they possess no official authority to act on behalf of the State of Delaware, any Police Department in any law enforcement capacity what so ever. The Law Enforcement Officers Safety Act of 2004 provides no authority for anyone to act in the capacity of a law enforcement official.

Printed Name of Retired/Separated Officer

Signature

Date

#### Qualified Separated Law Enforcement Officer Application for Certification to carry a concealed firearm 18 US.S.C. 926 C

(Verify each Statement, [print YES for each], then sign, date, and return to the range authority

	The	(name of agency) did provide me with a
separ	rated/retired law enforcemen	t identification card displaying my photograph.
<u></u>	l did separate in good stan	ding without an open disciplinary or administrative action.
	l did receive a regular sepa described as a mental disa	aration or a special disability separation not classified or bility.
<u> </u>	l have a non-forfeitable rig	ht to benefits under my agency's retirement plan.
	substance, and I will not ca	e of alcohol or another intoxicating or hallucinatory drugs arry a firearm while I am under the influence of alcohol or ucinatory drug or substance.
		e or federal law from receiving a firearm, based on domestic x-partes, restraining orders, etc or any other reason.
	l understand the definition silencer, or destructive dev	of "firearm" does not include any machine gun, firearms vice.
	-	he issued LEOSA qualification card, along with the retired tification issued by the agency I retired/separated from I weapon.
<u></u>	I understand my certification	on expires 365 days from its issue date.
	Enforcement Safety Act Im	rcement Officers Safety act of 2004/S 1132 Law provements Act of 2010 (18 U.S. Code 926C) does not ever to exercise law enforcement authority or act in the ent official.
appli	-	m under the penalty of perjury the contents of this to the best of my knowledge, information, and belief and n the designated space.

Printed Name of Retired/Separated Officer

Date

Signature