

Special Events Request Form

1. Applicant's Information		
_____	_____	_____
Name	Telephone	E-Mail
2. Event Information		

Name of Event		
_____	_____	_____
Date	Time	Number of Participants
Firearm Discipline for Event: Rifle _____ Shotgun _____ Handgun _____		
Sponsoring Organization (SASS, NRA, etc.): _____		
3. Club Resources Requested		
Is the use of the clubhouse requested? Yes ____ No ____		
Types of targets: _____		
Names and qualifications of RSOs (use back if more space is needed):		
Name	Qualification	
_____	_____	
_____	_____	
_____	_____	
4. Insurance Information		
Is there insurance coverage for the event? Yes ____ No ____		
If yes, name of insurance company: _____		
Is this a firearms training program? Yes ____ No ____		
If yes, are the instructors insured? Yes ____ No ____ N/A ____		
If yes, name of insurance company: _____		
5. Attachments		
Attach a description of the event to this form.		
In conjunction with the CRSO, prepare and submit a safety plan.		
6. Approvals		
Application is: Approved _____ Denied _____		
_____	_____	
Chief Range Safety Officer	Date	