



## PORTSMOUTH SCOUT SHOOTING CLUB

### PARENTAL CONSENT FORM - AIR RIFLE TARGET SHOOTING - ONCE ONLY

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

Name of Section: Scouts / Explorers

Proposed activity: Air Rifle Target Shooting - Air Pistol Target Shooting – Rifle Target Shooting –

Location: Lyons Copse (Solent Scout Training Centre)

Start time Saturday 29<sup>th</sup> Sept 2018

Finish time: Sunday 30<sup>th</sup> September 2018

Additional information \_\_\_\_\_

Leader: Portsmouth Scout Shooting Club

If any additional information is required please do not hesitate to contact the Leader of the activity.

#### **Parent's or Guardian's Consent**

I being the parent/guardian of the person named below declare that he/she is not subject to restrictions by virtue of the regulations set out in Section 21 of the Firearms Act 1968 which applies to persons who have served a custodial sentence and hereby give permission for my child .....  
(name of young person) to take part in Air Rifle Target Shooting on at the event above.

Please state if your son/daughter has a disability or condition that may be affected by this activity:

\_\_\_\_\_  
\_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_

Name \_\_\_\_\_ Parent/Guardian

Signed \_\_\_\_\_

Date \_\_\_\_\_