



Citizen Gun Safety & Training Course

Hosted by the Clarksville Police Department

Enrollment Form

General Information

Participation in the Clarksville Police Department Gun Safety & Training Course is a completely voluntary program offered to Clarksville Residents and the surrounding communities.

Participation in the program will require a criminal background check to insure only those with a clean criminal record are allowed to participate. The criminal background check is **mandatory for participation** in the training course. The Town of Clarksville and Clarksville Police Department reserve the right to exclude anyone from the course based on criminal record history and Police record searches. The Clarksville Police Department reserves the right to remove anyone from course at any time for any non-discriminatory reason(s).

Additionally a voluntary Waiver of Liability form will be required to participate in the course. A copy of the waiver is attached to this enrollment form. You will be provided the official waiver form which will be signed and witnessed at the beginning of the course. Anyone who does not agree and sign the form will be excluded from the course.

Submitting this enrollment form does not guarantee your acceptance or participation in the program. You will be notified by email if you are approved to attend, at which time you will be given 7 calendar days to submit payment for the course.

Payment must be made by cash or check in person at the Clarksville Police Department during Records Division hours of Monday thru Friday 8am to 3:30pm. Additionally, payment may be made via check or money order via US Mail to:

Clarksville Police Department
Attn: Civilian Gun Safety & Training Course
1970 Broadway Street
Clarksville, IN 47129

If a payment arrives after the cutoff date, the participant will be notified via email and given the option to have the funds returned via US Mail, or applied towards enrollment in the next training class if openings are available. Cancellations must be made a minimum of 5 calendar days prior to the course. Cancellations less than 5 calendar days prior to the course are not refundable.

If you have any questions regarding signup or the course itself, please contact Lieutenant Shane Bassett via email:

s.bassett@ClarksvillePolice.com

Please fill out the following information completely. Exclusion of any information will result in a rejection of the application.

Full Name _____ Drivers License No. _____

Street Address _____ City / State / Zip _____

Best Phone _____ E-Mail _____

Have you ever been convicted of **ANY** crime involving the use or threat of force including domestic violence? _____

Have you ever been convicted of **ANY** Felony crimes? _____

Do you currently have a concealed carry permit? _____

Briefly explain why you would like to take the course: _____

By signing below, I give the Clarksville Police Department or its designee my consent and approval to perform criminal background search(es) on me and understand that any omissions or exclusions to this application will result in the immediate elimination from the course.

Signature

Date

FOR YOUR REVIEW

The following liability waiver is for your review prior to the start of the Gun Safety & Training Course. If you do not agree with the waiver of liability do not attempt to enroll for the course as it is a requirement to take the course. The official waiver that must be signed will be provided to you at the start of the course.

WAIVER OF LIABILITY **FOR PARTICIPATION IN TOWN OF CLARKSVILLE'S** **GUN TRAINING PROGRAMS**

I hereby affirm that I have been well advised and thoroughly informed of the inherent hazards and policies of the Town of Clarksville Police Department's gun training program ("program"). I know that participation in the program is a potentially hazardous activity that includes risk of serious injury or death. I hereby personally assume all risks associated with my voluntary participation in this event for any harm, injury or damage whether foreseen or unforeseen, including but not limited to gun related incidents, and, in consideration of being allowed to participate in the gun training program, I hereby fully release, on behalf of my heirs, successors, or assigns, the Town of Clarksville, the Clarksville Police Department, and any Town of Clarksville employees from any and all claims for injury or damages arising from my participation in the gun training program.

I understand and agree that neither the Town of Clarksville, its Police Department, or its employees may be held liable in any way for any occurrence in connection with my participation in the gun training program that may result in injury, death or other damages to me or my family, heirs or assigns. I understand and agree that all entry fees are nonrefundable and nontransferable. Further, I acknowledge and agree that the Clarksville Police Department, in its sole discretion, may delay or cancel the event. I hereby personally assume all risks in connection with said event for any harm, injury or damage that may befall me, including all risks connected therewith, whether foreseen or unforeseen: and further to save and hold harmless said event and persons from any claim by me or my family, estate, heirs, or assigns arising out of my participation in this event.

I further state that I am of lawful age and legally competent to sign this affirmation of release, or that I have acquired the written consent of my parents or guardians; that I understand the terms herein are contractual and not a mere recital; and that I have signed this document of my own free will. It is my intention by this instrument to exempt and release the Town of Clarksville, its Police Department, and its employees and all event sponsors, providers, or hosts, from all liability whatsoever for personal injury, property damage or wrongful death arising out of or in the course of my participation in the event.

**Please only return or mail the first page of this enrollment form.
DO NOT send any money at this time.**

THANK YOU!