



City of Bayou La Batre Police Department
 8725 East Delcambre Street
 Bayou La Batre, AL 36509
 (251) 824-2757 Office
 (251) 824-2935 Fax



Scott Dagg
 Chief of Police

Mayor Henry Barnes

FIREARMS HANDLING SAFETY COURSE APPLICATION

APPLICANT'S NAME _____
 DATE OF BIRTH _____
 SOCIAL SECURITY NUMBER _____
 FIREARM MAKE _____ MODEL _____
 SERIAL NUMBER _____
 DRIVER LICENSE (STATE) _____ (NUMBER) _____

I, _____ (print), hold harmless, the City of Bayou La Batre/Bayou La Batre Police Department, all employees and agents working in conjunction with the firearms and/or self-defense training; from and against any and all liabilities, obligations, losses, damages, penalties, actions, judgments, suits, claims, costs, expenses and disbursements of any kind or nature whatsoever (including, without limitation, personal injury, death, property damage, and reasonable fees/disbursements of council in connection with any investigation, administrative or judicial proceedings commenced or threatened) regarding any injury sustained during training, prior to training or upon completion of training due to any slips, trips or falls, hearing injury or other injury received during said training including but not limited to accidental discharges, misfires, inappropriate handling of a firearm or other equipment used during demonstration(s) or during live fire training from ammunition or other projectiles fired during simulation(s) or training including any materials, equipment, hand to hand or pressure-point (strong arm or soft arm) instruction used during said training or the gross negligence, illegal acts, fraud or willful misconduct committed by attendees. Applicants must pass a criminal background inquiry prior to participating in firearms training or self-defense training.

Applicant Signature _____ Date _____
 Witness Name (Printed) _____
 Witness Signature _____ Date _____
 Witness Address _____ Phone () _____

