

## SEIPS Special Events Request Form

1. Name of applicant: \_\_\_\_\_

2. Applicant's phone #: \_\_\_\_\_ e-mail \_\_\_\_\_

3. Firearm discipline for event: \_\_\_\_\_ handgun \_\_\_\_\_ rifle \_\_\_\_\_ shotgun

4. Name of event: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Attach a brief description (type of shooting, type of targets, shooter 'movement' required?)

5. Event's parent organization (circle one) - (NRA) (scouts) (4H) (commercial) (non-profit) (other)

6. Ranges / bays requested for the event: \_\_\_\_\_

7. Is use of the clubhouse desired? \_\_\_\_\_ Yes (Normally incurs a \$40 fee) \_\_\_\_\_ No

8. Number of participants expected? \_\_\_\_\_

9. Types of targets / equipment to be used? \_\_\_\_\_

10. Name(s), qualifications (attach copy of credentials) of the instructor(s):

11. Name(s) and qualifications of the range / safety officers:

12. Does the event have insurance coverage? \_\_\_ Yes \_\_\_ No

Attach proof of insurance, or name & phone number of the insurance company:

13. Do the instructor(s) have insurance coverage? \_\_\_ Yes \_\_\_ No

Attach proof of insurance, or name & phone number of the insurance company:

14. At the discretion of the SEIPS Executive Board, if this is a unique shooting event, i.e. does not follow established rules of a parent organization, the requester may be required to submit a training / safety plan.

Date of application submittal? \_\_\_\_\_

Date of application board approval / denial? \_\_\_\_\_

\_\_\_\_\_  
Approved by

\_\_\_\_\_  
Date