

Registration for Saegertown Sportsmen Club
GUN SAFETY CLASS FOR BEGINNERS

Class Size is Limited to 25 Students- Registrations accepted on a First Come- First Served Basis
 \$45.00 Fee (Check or Money Order Only) must accompany Completed Registration Form

APPLICANT INFORMATION – TYPE/PRINT IN BLUE OR BLACK INK						
LAST NAME	JR., ETC.	FIRST NAME	MIDDLE INITIAL			
DATE OF BIRTH						
STREET ADDRESS			CITY	STATE	ZIP CODE	HOME TELEPHONE NO. - -
E-Mail Address						
Checks made payable to Saegertown Sportsmen Club, P.O. Box 77, Saegertown, PA 16433						
Check # _____ or M.O. # _____						
Lunch is included in registration fee. Ammunition for live fire portion of the class is provided and included in the registration fee. ALL PERSONAL FIREARMS AND AMMUNITION MUST BE KEPT IN A LOCKED CASE OR CONTAINER AND SECURELY STORED IN YOUR VEHICLE UNTIL THE CLASS IS COMPLETED.						
All attendees must provide their own eye and ear protection (Safety Glasses and ear plugs or muffs are required). Registration Fee includes a Provisional Membership in the club till the end of 2020.						
DO YOU MEET ANY OF THE FOLLOWING PROHIBITING CRITERIA UNDER 18 P.A.C.S. § 6109(e)(1)? Circle YES OR NO FOR EACH QUESTION:						
IS YOUR CHARACTER AND REPUTATION SUCH THAT YOU WOULD BE LIKELY TO ACT IN A MANNER DANGEROUS TO PUBLIC SAFETY?					YES	NO
HAVE YOU EVER BEEN CONVICTED OF AN OFFENSE UNDER THE ACT OF APRIL 14, 1972 (P.L. 233, NO. 64) KNOWN AS THE CONTROLLED SUBSTANCE, DRUG, DEVICE AND COSMETIC ACT (CSDDCA)? (AS PROVIDED IN 18 P.A.C.S. § 6109(e)(1)(II), ANY PENNSYLVANIA DRUG CONVICTION UNDER THE CSDDCA IS PROHIBITING FOR A LICENSE TO CARRY.)					YES	NO
HAVE YOU EVER BEEN CONVICTED OF A CRIME ENUMERATED IN § 6105(b), OR DO ANY OF THE CONDITIONS UNDER § 6105(c) APPLY TO YOU?					YES	NO
HAVE YOU EVER BEEN ADJUDICATED DELINQUENT FOR A CRIME ENUMERATED IN § 6105 OR FOR AN OFFENSE UNDER THE CONTROLLED SUBSTANCE, DRUG, DEVICE AND COSMETIC ACT?					YES	NO
HAVE YOU EVER BEEN INVOLUNTARILY COMMITTED TO A HOSPITAL/HEALTH CARE FACILITY FOR A MENTAL HEALTH CONDITION OR OTHER TREATMENT, OR ADJUDICATED INCOMPETENT/INCAPACITATED?					YES	NO
ARE YOU AN INDIVIDUAL WHO IS A HABITUAL DRUNKARD, OR WHO IS ADDICTED TO OR AN UNLAWFUL USER OF MARIJUANA OR A STIMULANT, DEPRESSANT, OR NARCOTIC DRUG?					YES	NO
ARE YOU NOW CHARGED WITH, OR HAVE YOU EVER BEEN CONVICTED OF A CRIME PUNISHABLE BY IMPRISONMENT FOR A TERM EXCEEDING ONE YEAR? THIS IS THE MAXIMUM SENTENCE YOU COULD HAVE RECEIVED, NOT THE ACTUAL SENTENCE YOU DID RECEIVE. (IT DOES NOT INCLUDE FEDERAL OR STATE OFFENSES PERTAINING TO ANTITRUST, UNFAIR TRADE PRACTICES, RESTRAINTS OF TRADE, OR REGULATION OF BUSINESS; OR STATE OFFENSES CLASSIFIED MISDEMEANORS AND PUNISHABLE BY A TERM OF IMPRISONMENT NOT EXCEEDING TWO YEARS.)					YES	NO
HAVE YOU EVER RECEIVED A DISHONORABLE DISCHARGE FROM THE UNITED STATES ARMED FORCES?					YES	NO
ARE YOU A FUGITIVE FROM JUSTICE? THIS DOES NOT APPLY TO MOVING OR NONMOVING SUMMARY OFFENSES UNDER TITLE 75 (RELATING TO MOTOR VEHICLES).					YES	NO
ARE YOU PROHIBITED FROM POSSESSING OR ACQUIRING A FIREARM UNDER THE STATUTES OF THE UNITED STATES?					YES	NO
ARE YOU A UNITED STATES CITIZEN? IF NOT, COUNTRY OF CITIZENSHIP _____ ALIEN REGISTRATION # OR I-94# _____					YES	
IF YOU ARE A RESIDENT OF ANOTHER STATE, DO YOU POSSESS A CURRENT LICENSE, PERMIT, OR SIMILAR DOCUMENT TO CARRY A FIREARM ISSUED BY THAT STATE? IF YES, ATTACH A PHOTOCOPY OF THE DOCUMENT TO THIS FORM.					YES	NO
I have never been convicted of a crime that prohibits me from possessing or acquiring a firearm under Federal or State law. I am of sound mind and have never been committed to a mental institution or mental health care facility. I hereby certify that the statements contained herein are true and correct to the best of my knowledge and belief. I understand that if I knowingly make any false statements herein, I am subject to penalties prescribed by law. I authorize the sheriff, or his designee, to inspect only those records or documents relevant to information required for this application. This certification is made subject to both the penalties of § 4904 of the Crimes Code, 18 Pa.C.S., relating to unsworn falsifications to authorities and the Uniform Firearms Act.						
SIGNATURE - APPLICANT _____				DATE OF APPLICATION _____		