

# **PINE RIVERS SHOOTING CLUB INC.**

Registered Shooting Club Permit Approval No: 80000352-01

**P.O. Box 5587 BRENDAL QLD 4500**

## **PARENT / GUARDIAN CONSENT FORM**

Juniors/Minors accompanied by their parents or legal guardians do not need to complete this consent form. This form **MUST** be completed for any Minor who will not be accompanied by their parent/guardian.

### **Competition details**

- . Target shooting at the Madden Range, Mt Petrie Road, Belmont – using primarily pistols, although on field shoot nights they may also have the opportunity to try small calibre rifles and shotguns.
- . All first time attendees will be taken through a firearms safety session with one of the range officers in the designated safe area, where they will learn how to safely handle a firearm.
- . All attendees participate in a safety brief each night prior to commencing the competition.
- . The competition will be conducted under the direction of the Controlling Range Officer and assisting Range Officers. Each Minor will be under the guidance/direction of a Range Officer who has been appointed to oversee that Minor for the night.
- . If the Minor does not have a Minors Firearms Licence they will need to complete the attached Form 33 each time they shoot. This must be counter signed by their parent / guardian.
- . They will also need to bring a Current Photo ID e.g. Student ID.
- . All attendees will need to wear enclosed footwear. Loose clothing is not advised as ammunition cases are hot.
- . The Pine Rivers Shooting Club will provide eye and ear protection and a firearm can be hired for the night.

### **Competition Costs**

- . \$20.00 for non-member on normal competitions
- . \$ 7.50 for PRSCi junior member.
- . \$ 5.00 extra for the Ribbon Competition ( 2nd Tuesday of the month )
- . \$15.00 for the hire of a .22 pistol, including ammunition

Payment is by cash only

If you wish for your Minor to participate in the competition please complete the attached consent form and have them accompany your child to the range.

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## Consent

Please complete the required information and check all appropriate boxes below to indicate your agreement / consent:

- ☐ I have read all of the information contained in this form in relation to the competition (including any attached material) and I am aware that the Pine Rivers Shooting Club Inc (PRSCi) does not have personal accident insurance cover for Minors.
- ☐ I give consent for my child, \_\_\_\_\_ (print the Minor's full name) to participate in the competition detailed.
- ☐ I have arranged for my child to travel to and from the competition in the care of \_\_\_\_\_ (print persons full name).
- ☐ I agree to pay the costs detailed on the previous page for my child's to participation in the competition.
- ☐ In the event of an accident or illness, I authorise PRSCi to obtain or administer any medical assistance or first aid my child may require, including seeking further medical advice.
- ☐ I have provided the PRSCi all relevant details relating to my child's medical or physical needs.
- ☐ I accept liability for all costs incurred in obtaining such medical assistance or treatment (including Transportation costs) and undertake to reimburse the PRSCi the full amount of any costs incurred on my child's behalf.
- ☐ I have supplied a copy of my Photo ID also showing my signature.

Parent/Guardian Name: \_\_\_\_\_  
(Please Print)

Parent/Guardian Signature: \_\_\_\_\_

Address of Parent/Guardian: \_\_\_\_\_  
\_\_\_\_\_

Emergency contact Phone number: \_\_\_\_\_

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Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

## Relevant Medical Information

Please give details of any medical/allergies, physical, management etc. conditions which may affect your child's participation in the competitions described in this form.

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## You may wish to provide the following information

Name of Minor's medical practitioner: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Medicare No: \_\_\_\_\_

Private Health Insurance Company: \_\_\_\_\_

Membership number: \_\_\_\_\_

## Privacy Notice

The Pine Rivers Shooting Club Inc is collecting personal information in this form in order to:

- Obtain legal consent for your child to participate in the sport of shooting.
- Help coordinate the competition
- Respond to any injury or medical condition that may arise during, or as a result of the competition.

The information will only be accessed by authorised club members and will be dealt with in accordance with the confidentiality requirements of the Information Privacy Act 2009 (QLD)

The information will not be disclosed to any other person or agency unless it is for the purpose stated above, the disclosure is authorised or required by law, or you have given PRSCI permission for the information to be disclosed.

## Competition Risks & Insurance

The competition outlined above carries an inherent risk of physical injury occurring. Please note that the Pine Rivers Shooting Club Inc does not have personal accident injury cover for children. If your child is injured as a result of an accident or incident, all of the costs associated with the injury, including medical costs are the responsibility of the parent/guardian. Medicare may cover some of the incidental medical costs. If you have private health insurance, some of the costs may also be covered by your provider. Any other costs must be covered by parents/guardians. It is up to the parent/guardian to decide what types and what level of private insurance they wish to arrange to cover their child. Please take this into consideration in deciding whether or not to allow your child to participate in the sport/competition of shooting.