



www.police.nsw.gov.au  
ABN 43 408 613 180

# NSW POLICE FORCE FIREARMS REGISTRY

P650

## Declaration - Person shooting on an Approved Range or undertaking a Firearms Safety Training Course

**This form must be completed by all unlicensed persons before they can possess and use firearms in accordance with the NSW Firearms Act 1996 and Regulation. Return the form to the club or range official or the instructor upon completion.**

### A. PERSONAL DETAILS

If this application is for a minor (12 - 18 yrs), the minor completes their details and must record their parent/guardian's photo ID details.

Name

Address

Phone Number

Date of Birth    Male  Female  Driver Licence or Passport No.

Type of Photo ID  Photo ID Number

**Previous / other known names** - If you have been known by another name, please provide details (Last Name, Given Names)

### B. PERSONAL HISTORY - You MUST complete this section - Mark X in one box for each question

Have you in NSW or elsewhere;

- a) Been refused or prohibited from holding a firearms licence or permit or had a firearms licence or permit suspended, cancelled or revoked? YES  NO

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- b) Been the subject of a Firearms Prohibition Order? YES  NO

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- c) Within the last 10 years been convicted of an offence involving firearms, weapons, prohibited drugs, robbery, violence, terrorism or an offence of a sexual nature? YES  NO

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- d) Within the last 10 years been the subject of a Family Law or Domestic Violence Order or an Apprehended Violence Order (other than an order that was revoked)? YES  NO

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- e) Ever attempted suicide or self harm? YES  NO

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- f) In the past 12 months been treated or referred for treatment for alcoholism, drug dependence or a mental illness within the meaning of the *Mental Health Act 2007* or as a mentally disordered person within the meaning of that Act? YES  NO

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- g) Currently subject to a Good Behaviour Bond? YES  NO

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- h) Currently subject to an Interim Apprehended Violence Order? YES  NO

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- i) Currently suffering from any mental illness or other disorder that may prevent you from using a firearm safely? YES  NO

**IF YOU ANSWERED YES TO QUESTION (a) SPEAK DIRECTLY TO A CLUB REPRESENTATIVE  
IF YOU ANSWERED YES TO QUESTIONS (b) - (i) YOU ARE INELIGIBLE TO PARTICIPATE IN SHOOTING ACTIVITIES  
INVOLVING THE POSSESSION AND USE OF FIREARMS.**

**PLEASE TURN OVER FOR DECLARATION AND CLUB CERTIFICATION**

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### C. DECLARATION

- I understand that it is a serious offence under the *Firearms Act 1996* to make a statement or provide information that I know is false or misleading and I certify that all the information contained in this declaration is true and correct in every detail.
- I agree to the NSW Police Force undertaking such enquiries as are necessary to establish that the information I have provided in relation to this application is true and correct.

Applicant's Signature

Date

### D. MINORS (12 - 18 years of age) - TO BE COMPLETED BY PARENT / LEGAL GUARDIAN

I give consent for the person named in this Declaration (the Minor) to participate in shooting activities involving the possession and use of firearms.

Parent/Guardian Signature

Date

**NOTE:** The parent/legal guardian must supply photographic proof of identity to the range/club official or firearms instructor. The range/club official or instructor must be satisfied that this requirement has been met.

### E. CERTIFICATION BY CLUB/RANGE OFFICIAL OR INSTRUCTOR - OFFICIAL/INSTRUCTOR USE ONLY

The above named person is:

Authorised to shoot

Not authorised to shoot

Signature

Date

Club/Range Official  
or Instructor Name

Club Name

Nowra Rifle Club Inc.

Club/Range  
Approval No

406 732 201

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Vers 1.7 January 2021

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