

# Temporary Guardian Authorization Form

(This form must be completed and presented at time of check-in. Please print clearly – Not valid if illegible)

## Activity, Class or Event (**ACTIVITY**):

All ACTIVITIES will take place at Securite Gun Club (SECURITE) unless otherwise noted in the ACTIVITY's posted description.

Date(s) (DATES): \_\_\_\_\_

- ACTIVITY Type:  Use of shooting bay with the TEMPORARY GUARDIAN without an instructor  
 SECURITE Training Class  
 Firearm involved ACTIVITY: \_\_\_\_\_  
 Non-firearms ACTIVITY

## Child/Dependents' (**CHILD**) Information:

First Name: \_\_\_\_\_ Middle: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

## Parent/Guardian (**PARENT**) Information:

First Name: \_\_\_\_\_ Middle: \_\_\_\_\_ Last Name: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### PARENT Identification Information: (Must be filled out)

ID Type:  Driver's License  Passport  Other: \_\_\_\_\_

Issued By:  WA  USA  Other: \_\_\_\_\_

ID Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

### Additional Emergency Contact (Optional):

Full Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

## Temporary Guardian (**TEMPORARY GUARDIAN**) Information:

Must present matching valid identification, email and phone contact information at time of sign-in.

First Name: \_\_\_\_\_ Middle: \_\_\_\_\_ Last Name: \_\_\_\_\_

Relationship: \_\_\_\_\_ Organization (Optional): \_\_\_\_\_

## PARENT Consent:

I, as the PARENT, hereby give my permission for my CHILD to attend the listed ACTIVITY under the supervision of the TEMPORARY GUARDIAN on the specified date(s). I acknowledge that I have discussed this arrangement with both my CHILD and the TEMPORARY GUARDIAN. I acknowledge and agree that SECURITE may refuse service to anyone, at any time, for any reason.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
(PARENT Signature)

## TEMPORARY GUARDIAN Consent:

I, as the TEMPORARY GUARDIAN will take full responsibility for the CHILD during the ACTIVITY listed above. I certify that I am over 21 years of age. I agree to follow all rules, conditions and regulations of SECURITE. I agree to follow all SECURITE staff's instructions. I acknowledge and agree that SECURITE may refuse service to anyone, at any time, for any reason.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
(TEMPORARY GUARDIAN Signature)