



# PISTOL SAFE HANDLING COURSE COMPLETION CERTIFICATE

PISTOL CLUB NAME	
PISTOL CLUB APPROVAL NUMBER	

**This certificate is to accompany an application for a probationary pistol licence or a minors pistol training permit.**

**TYPE OF APPLICATION - Select one box only**

<input type="checkbox"/> <b>Probationary Pistol Licence (PPL)</b>	<input type="checkbox"/> <b>Minors Pistol Training Permit</b>
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**PERSONAL DETAILS OF CLUB MEMBER**

Full Name			
Residential Address			
Suburb / Town		Postcode	
Date of Birth (DD,MM,YYYY)			
		<b>NSW Driver's Licence No.</b>	
Cat A/B Firearms licence number (if applicable)		Expiry Date (DD,MM,YYYY)	

**PISTOL CLUB MEMBERSHIP DETAILS**

Member Number		Joining Date (DD,MM,YYYY)				Expiry Date (DD,MM,YYYY)			
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**PISTOL CLUB CERTIFICATION**

I hereby certify that the person whose details appear on this certificate is a current member of the above pistol club and the member has completed a pistol safe handling course to the satisfaction of the pistol club, as required by section 11(3)(b) of the *Firearms Act 1996* and as prescribed by clause 144 of the *Firearms Regulation 2017*.

**Club Accredited Training Officer**

Signature		Date (DD,MM,YYYY)			
Full Name		Category H Licence No			

*It is an offence under the Firearms Act 1996 and associated Regulation to dishonestly issue this certificate .*

*For further information or assistance with completing this certificate, please call the Firearms Registry Customer Service line on 1300 362 562 and ask to speak to the Clubs Unit.*

