



**Application for an Exemption under
Section 11(6) of the Firearms Act 1968**

Full name of organiser.....

Address of organiser.....

.....
.....

Date of birth of organiser

Telephone number(s) of organiser

e-mail address

Name (if any) of event or organisation

Time(s) of event(s)

Date(s) of Events(s)

Address of event or details of land over which it is intended to shoot;
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.....

Maximum number of persons likely to attend the event(s).....

Minimum number of responsible persons controlling the event(s).....

Number of shotguns supplied for the shoot.....

State if club shotguns or belonging to individual certificate holders/members.....

I am aware of the guidelines on health & safety for shooting. A Health & Safety at Work etc Act 1974 risk assessment has been conducted.....YES/NO

There is insurance under public liability.....YES/NO

Please display in a prominent place a notice relating to section 21 of the Firearms Act 1968 which refers to prohibited persons who are not allowed to possess firearms.

Declaration

I accept responsibility for the safe conduct of the shooting event(s) and will comply with the recommended guidelines.

I understand the information I have supplied has been given voluntarily

Signature (electronic or hand written)

Print Name

Date

Please return your application via e-mail to;

firearms.licensing@cambs.pnn.police.uk

If you do not have the facility to e-mail, please post to ;

Firearms and Explosives Licensing Department
Hinchinbrooke Park
Huntingdon
Cambs
PE29 6NP