

SC-CWP Course

Steve Kelsay, NRA Certified Instructor
SLED Certified Concealable Weapons Permit Instructor
14 Eastgrove Court, Columbia SC 29212 803-753-8698 Cell - 803-622-0137
Email: cwptrain@gmail.com

KEEP A COPY OF THIS PAGE. RETURN THE FOLLOWING SIGNED APPLICATION FORMS.

1. This is a SC Concealed Weapons Permit training class accredited by SC SLED. All requirements for the SC CWP will be met in this training.
2. Firearms: Each student will need to bring a SAFE functional handgun. Handguns may be semi-auto or revolver in any caliber. Extensively modified target or competition guns are strongly discouraged. Firearms of questionable safety or will not be allowed. If you need to borrow one let us know. If the firearm is new, please be sure to clean it before bringing it to the class to remove preservatives which may cause dangerous pressures to build up in the barrel of the firearm.
3. **NO FIREARMS ARE ALLOWED IN THE CLASSROOM UNLESS FIRST AUTHORIZED BY THE TRAINING INSTRUCTOR. FIREARMS BROUGHT TO THE FIRING RANGE MUST BE UNLOADED AND CASED OR HOLSTERED.**
4. Ammunition: Students will need to bring a minimum of 60 rounds of fresh full power factory ammunition. Please bring fresh, new boxed rounds. We will shoot 50 rounds for the qualification, but bring extra if you wish to practice first. Up to 10 rounds may be used to evaluate your skills and safety procedures prior to qualification firing. No hand loaded ammunition will be permitted for safety and liability reasons.
5. Equipment: Students will need a pen, a baseball type cap, hearing protection, eye protection and cleaning supplies for your firearm. If you do not own hearing and eye protection, you can purchase them at any shooting or sporting goods store. Any regular glasses are acceptable. You need a quality belt and holster, strong side only. No cross-draw, shoulder, or small-of-back holsters are allowed (safety issue). You will need a shirt or jacket for concealment firing. **IF YOU HAVE ANY QUESTION ABOUT HOLSTERS OR EQUIPMENT CALL US BEFORE BUYING.** If you borrow one of our handguns, we will provide a holster, but you still need a strong belt to carry the weapon and holster.
6. Class Schedules: The class will normally start at 8 a.m. and will continue the entire day. SC state law requires the class to last a minimum of 8 hours. Specific class times will be found on the class information sheet and map provided separately. There will be time for breaks and for lunch. Range may be rescheduled to another day if there are dangerous weather conditions forecast.
7. Deposit: Full payment for the course and this completed registration form will assure you a place in the course. Make check or money order payable to Steve Kelsay, 14 Eastgrove Court, Columbia, SC 29212 . If you cannot take the class, you will have one year to reschedule. **No refunds.**
8. Special Needs: If you have any medical condition or physical disability please let us know .
9. Standards: A written test as well as an applicable firearm proficiency test will be required. Practical proficiency and safe handling of the applicable firearm must be demonstrated to the instructor's satisfaction. **Students refusing to follow safe practices as demonstrated in class or who repeatedly handle firearms in an unsafe manner will be expelled, and will not receive a refund.** The instructor's judgment will be final in all cases. SAFETY IS FOREMOST.
10. Release of Liability: All students will be required to execute a full waiver of liability.

Please keep this form for your records

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Steve Kelsay, NRA Certified Instructor and Training Counselor
SLED Certified Concealable Weapons Permit Instructor
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TRAINING COURSE REGISTRATION FORM

Please fill out this form completely. Please print legibly. Leave no blanks.

Desired Class Date: _____

Name: (as you want it to appear on your certificate!!) _____

Email: _____ Sex _____ DOB _____

Street _____ City _____ State _____ Zip _____

Day Phone _____ Evening Phone _____

In case of emergency contact _____ Relationship _____

Phone _____ Street _____ City _____ State _____ Zip _____

Your occupation: _____

Describe any military/law enforcement/legal/competitive qualifications, training and how regularly you practice:

National Rifle Association member? Yes ___ No ___ If yes, member number _____

Status: Annual ___ Life ___ Other _____

I will need to borrow a handgun, _____ Yes _____ No

Describe the firearm(s) you will bring to the course:

Make _____ Model _____ Caliber _____

Are you right handed or left handed? Right ___ Left ___ Ambidextrous ___

Type of payment: Check ___ Money Order ___ Cash ___ Amount Sent \$ _____

I have read and understand the foregoing two pages and agree to abide by these terms.

Applicant's Signature

Date

Firearms Certification

In order to prevent any legal problems, I ask that you read and sign this statement. I am relying on this statement to ensure that no firearms are provided to anyone in contravention of any existing law restricting the possession of firearms to individuals within South Carolina.

I understand that persons meeting any of the following conditions are prohibited by federal or state law to possess a handgun:

1. A felon
2. An illegal immigrant
3. A person under the age of 18, but this shall not apply to the issue of handguns to members of the Armed Forces of the United States, active or reserve, National Guard, State Militia, or R. O. T. C., when on duty or training or the temporary loan of handguns for instructions under the immediate supervision of a parent or adult instructor
4. A person currently charged for a crime that would, upon conviction, be barred from possessing a handgun
5. A person who was dishonorably discharged from any of the armed forces of the United States.
6. A person who has been convicted in any court of a crime punishable by imprisonment for a term exceeding one year.
7. A person who has been convicted of a crime of violence in any court of the United States, the several states, commonwealths, territories, possessions, or the District of Columbia or who is a fugitive from justice or a habitual drunkard or a drug addict or who has been adjudicated mentally incompetent
8. A person who by order of a circuit judge or county court judge of this State has been adjudged unfit to carry or possess a firearm
9. A person subject to a court order prohibiting stalking, harassing, or threatening an intimate partner or child of an intimate partner or placing them in reasonable fear of bodily injury
10. A person found by a court or mental facility to have certain mental disabilities
11. A fugitive from Justice
12. A person who has formally renounced US citizenship
13. A member of a subversive organization

I certify that I am not a person prohibited under federal or state law from possessing a handgun, and none of the above conditions apply to me.

Date: _____

Printed Name _____

Signature _____

Liability release and Assumption of Risk Agreement

Please read carefully and fill in all blanks before signing.

I, _____, hereby affirm that I am aware that Firearms training and operations have inherent risks which may result in serious injury or death.

I understand that operating firearms with explosive components involves certain inherent risks which may require transport to a medical facility; explosive detonations, misfiring, hang firing, and other malfunctioning of ammunition, the firearm or its components; ricocheting of projectiles, or impacted materials which may occur during training.

I understand that the activities which are necessary for training and for certification, may be conducted at a site that is remote, either by time or distance or both, from such a medical facility. I still choose to proceed with such instructional activities in spite of the possible absence of a medical facility in proximity to the training site.

I understand and agree that neither my instructor(s), Steve Kelsay, Sean Kelsay, Bill Rentiers, the facility at which I receive my instruction, nor any of their respective employees, officers, agents, contractors, or assigns, (hereinafter referred to as "Released Parties") may be held liable or responsible in any way for any injury, death, or other damages to me or my family, heirs, estate, or assigns that may occur as a result of my participation in this firearms class or as a result of the negligence of any party, including the Released Parties, whether passive or active.

In consideration of being allowed to participate in this course, I hereby personally assume all risks of this course, whether foreseen or unforeseen, that may befall me while I am a participant in this course, including but not limited to the academics, travel, or practical firing activities.

I further release, exempt, and hold harmless said course and Released Parties from any claim or lawsuit by me, my family, estate, heirs, or assigns, arising out of my enrollment and participation in this course including both claims arising during the course or after I receive my certification.

I also understand that shooting and participating in live fire exercises are physically strenuous activities and that I will be exerting myself during this firearms training course, and that if I am injured as a result of a heart attack, panic, hyperventilation, or any other cause, that I expressly assume the risk of said injuries and that I will not hold the Released Parties responsible for the same.

I further state that I am of lawful age and legally competent to sign this liability release, or that I have acquired the written consent of my parent or guardian.

I understand the terms herein are contractual and not a mere recital, and that I have signed this document of my own free act and with the knowledge that I hereby agree to waive my legal rights. I further agree if any provision of this Agreement is found to unenforceable or invalid, that provision shall be severed from this Agreement. The remainder of this Agreement will then be construed as though the unenforceable provision had never been contained herein.

I _____ BY THIS INSTRUMENT AGREE TO EXEMPT AND RELEASE MY INSTRUCTORS Steve Kelsay, Sean Kelsay, Bill Rentiers THE FACILITY THROUGH WHICH I RECEIVE MY INSTRUCTION, AND ALL RELATED ENTITIES AS DEFINED ABOVE, FROM ALL LIABILITY OR RESPONSIBILITY WHATSOEVER FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH HOWEVER CAUSED, INCLUDING, BUT NOT LIMITED TO, THE NEGLIGENCE OF THE RELEASED PARTIES, WHETHER PASSIVE OR ACTIVE. I HAVE FULLY INFORMED MYSELF OF THE CONTENTS OF THIS LIABILITY RELEASE AND ASSUMPTION OF RISK AGREEMENT BY READING IT BEFORE I SIGNED IT ON BEHALF OF MYSELF AND MY HEIRS.

Participant's Signature Date (Day/Month/Year)

Signature of Parent or Guardian (where applicable) Date (Day/Month/Year)