



ABN 68 580 241 497

# FIREARMS IDEMUNITY FORM

602 Warton Rd Southern River WA 6110

Phone: 9455 1188

Email: [k9@dogswest.com](mailto:k9@dogswest.com)

Website: [dogswest.com](http://dogswest.com)

I, \_\_\_\_\_,

membership number \_\_\_\_\_,

hereby indemnify the Canine Association of WA (Inc) (the Association) against any claim for injury or damage that I might suffer arising from the use of firearms owned by the Association.

Signed \* \_\_\_\_\_

Dated \_\_\_\_\_

\* If a member is under 18 years of age this form is to be signed by a parent or legal guardian.

This indemnity form should be signed and returned to Dogs West.

Once received, a card will be issued showing that you have signed the waiver.

You will then be permitted to handle the corporate Firearms under the supervision of a person who has a Nominated Person Authorisation, issued by WA Police Licensing Services.

A Dogs West member may sign the waiver on the day of a trial. The form is to be retained by the Trial Secretary and forwarded to Dogs West for processing on behalf of the member.

**Members who have not signed the waiver are not permitted to use Dogs West firearms.**