NSW Police Force www.police.nsw.gov.au

NSW POLICE FORCE - FIREARMS REGISTRY

International Visitors Competition Permit Legitimate Reason Form

PLEASE READ THE FOLLOWING INFORMATION PRIOR TO COMPLETING THIS FORM

This is an **interactive** form and applies to persons who are <u>not residents of Australia</u> and who intend to visit NSW for the purpose of <u>competing in an organised shooting competition</u> being conducted by an approved NSW shooting club.

Sections 1 to 5 must be completed by all applicants.

<u>If this application is for a minor</u> (person aged 12 - 18 years), **Section 6** 'Parental/Guardian Declaration' <u>AND</u> **Section 7** 'Details of Person Travelling with Minor' must also be completed.

Please complete all sections, print this form and submit with the P634 'Application for a Firearms Permit' form and any supporting documentation to the **Firearms Registry**, **Locked Bag 5102**, **Parramatta NSW 2124**, **Australia**.

NOMINATED PERM	IIT HOLDER NAME			
Name				
1. TRAVEL DETAILS	S & CONTACT INFO	ORMATION		
Arrival Date		Arrival Time	I	Arrival Port
Departure Date		Departure Time	F	Port
Attach a copy of you and expiry date.	· ·	·		ss, passport number, country of issue
	Provide Visa Number	and Expiry Date, if applicable	?	
ADDRESS AND CONTAC	T DETAILS WHILE IN NS	<u>sw</u>		
Address in NSW				
Phone Contact Details in NSW				
2. COMPETITION D	ETAILS			
Competition Name			Competition Dates	1
Competition Location				
Name of Organisaton Running Competition				
Contact Person that Issued Invitation				
		anisers confirming your invi event location and event d		at the relevant shooting competition

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3. LICENSI	NG DETAILS IN COUNTRY OF F	RESIDENC	E				
Are you a member of a shooting club in your country of residence?							
NOTE: If you	answered 'YES' you must attach a copy	y of your clu	b membership	with this ap	oplication.		
Is a licence o	r permit required in your country of	residence	to possess, car	ry or use fi	rearms?	YES/NO	
	answered 'YES' you must attach a copy answered 'NO' you must have Section						
	CLEARANCE CERTIFICATION Fence or other authority for the possessi					tate of residence, after	
	orint this form and have this section ce			•			
residence.	he person named in this application is hat the applicant is of good character a						
Police Officer Name and Ra					Date		
Police Station	1		Country/Area Code				
Phone Numb	er		Police Officer Signature				
5. FIREARI	M DETAILS					YES/NO	
	ging any firearms into NSW for the purp	pose of com	peting in an or	ganised sho	ootina comp		
	complete the firearm details below. If				3 .		
Firearm 1							
Firearm		Make			Model		
Type							
Actuation Type		Loadir Action	-		Serial No		
Propellant Type		Calibr	e		Magazine Capacity		
bringing into	inging more than one firearm, pleas o NSW and complete details of the a	dditional fi	rearms at the o	end of this	form.	Amount	
ii you are im	porting more than one firearm, expl	iain Delow	your special n e	eeu for add	ntional Tirea	ariiis.	
ADDITION	AL FIREARM DETAILS						
Firearm 2	——————————————————————————————————————						
Firearm] _{N4 - 1 - 1}		
Туре		Make			Model		
Actuation Type		Loadir Action	_		Serial No		
Propellant					☐ Magazine		
Type		Calibr	e		Capacity		

<u>Firearm 3</u>						
Firearm Type				Model		
Actuation		 Loadin	α [□		
Type		Action	9	No		
Propellant		Caliban		Magazine	Magazine	
Туре		Calibre	2	Capacity		
Firearm 4						
Firearm Type	Make			Model	odel	
Actuation		 Loadin	g	Serial		
Туре		Action		No		
Propellant		Calibre	2	Magazine Capacity		
Type				Capacity		
Firearm 5						
Firearm Type		Make		Model		
Actuation		 Loadin	9	Serial		
Туре		Action		No		
Propellant		Calibre	2	Magazine Capacity		
Type				Capacity		
	and/or firearm parts					
Indicate below	the number of rounds and calibre o	f the ammur	nition and/or firearm part	s you are bringing.		
Ammunition		Calibre		Rounds		
ـــــــــــــــــــــــــــــــــــــ				Dada		
Ammunition		Calibre		Rounds		
Ammunition		Calibre		Rounds		
-·						
Firearm Parts						
FURTHER INF	ORMATION					
	nce under the <i>Firearms Act 1996</i> to r	nako a stator	nont or provide informat	ion in relation to an	application that	
	ling. By signing the Declaration on y		-			
	L the information supplied in relation					
If this permit is ap	oproved and you have indicated you	ı are importir	ng firearms for competition	on purposes, a B709	Police	
	be issued to allow the release of fire					
CHECKLIST - N	Make sure you have supplied <u>A</u>	<u>ALL</u> of the f	ollowing required in	formation:		
All applicants	are required to provide:					
	ed P634 'Application for a Firearms	Permit' form				
() // Compres	Car of Typpication for a firedims	T CITILE TOTAL				
○ A Legitima	ate Reason form with the relevant s	ections comp	oleted:			
	Dates and Contact information while	e in NSW				
O Convo	f Daggagage					
() сору о	f Passport					
Details	of Competition					
Licensi	ing details in your country of resider	nce <u>or</u> police	clearance certification co	ompleted		

○ De	etails of firearms a	nd ammunition to be	e imported,	if applicable			
○ Sp	ecial need for add	litional firearms, if yo	u are impor	ting more than	one firearm		
Lis	t of additional fire	arms, if applicable					
\$7	5 fee with the ap	plication					
Applicants	s who are Minors	are required to pro	vide the fo	llowing additi	onal informatio	ո։	
		velling with minor		•			
O Pa	rent / Guardian De	eclaration completed	dincluding	proof of identit	y documentation	to prove	legal guardian status
⊖ Gu	ardian document	ation to prove legal o	guardian sta	itus			
	SECTIO	DNS 6 & 7 MUST BE				IS FOR	
		A MINOR (A	A PERSON	12-18 YEARS (OF AGE)		,
		DECLARATION		_			
	on must be comp tors Firearms Perr	oleted by a Parent or I mit.	Legal Guard	lian and gives c	onsent to obtain	a Minor's	(Temporary)
		or the parent or legal	l guardian				
	,	n must attach docun	•	prove legal gu	ıardian status		
				. 55			
Last Name			GIVE	en Names			
Relationship to Applicant				of Birth of nt/Guardian			
Address							
• appli	cation. I confirm th	m the Parent / Legal G nat this application is t ossess and use firearms	true and cori	ect in every deta	ail and I give my co	onsent to	allow the applicant
Signature of	Parent/Guardian					Date	
Witness Nam over 18 years	•					Date	
Address of W							
		TRAVELLING WIT					
		with and supervising Competitor permit m			ig or using firearr	ns in insv	V, an application for an
Last Name			G	iven Names			
Address							
Relationship to Applicant							
Passport Number			Expiry Date		Country of Issue		
Arrival			Date Arrival		Arrival		
Date			Time		Port		
Departure Date			Departure Time		Departure Port		