U.S. NAVAL SEA CADET CORPS									
U.S. NAVY LEAGUE CADET CORPS									

MARKSMANSHIP TRAINING CONSENT FORM (CADET)

THIS FORM MAY COVER MULTIPLE DAYS OR EVENTS IN A CALENDAR YEAR IF HELD AT THE SAME LOCATION

				JNGEN			1)			
THE CO/COT	FORM IS REQUIR	ED FOR ALL MARKS HARD COPY OF THIS IP TRAINING ACTIVIT	COMPLETED	FORM AND	D HAVE IT A	AILALBE FOR	INSPECTION FO	OR EVERY CADET	THAT IS	
From: CO / COTC 1a. Unit Name or Training Comma					nd				1b. Unit/Training Code 1c. Date (DD MM	
To:	2a. Last Name	2b. F			rst Name			2d. Rate	2e. US	SNSCC ID Number
	2f. Exp. Date	2g. Date of Birth	2h. Sex	Female	2i. Primary Contact Number		r	2j. Secondary Contact Number		Number
	20. Parent/Guardian Name(s)									
	2q. Emergency Contact Name (other than Parent/Guard				2r. Emerg	rimary Phone	2s. Emergency Contact Alternate Phone			
Report to:	3a. Training Name/Description				3b. Training Location					
	3a. Purpose of Training (check all appropriate boxes)		USNSCC Marksman training and qualifica			SASP training	SASP Competit	Advanced Training: Sec ion Marksmanship Training		
	3d. Training Star	3e. Training End Date (DD/MM) 3f. Number	of consecutive of	days or list of non-	consecu	utive training dates	
	3h. CO/COTC (3 i. C	3i. CO/COTC Primary P			3 j. CO/CO	C E-Mail Address			
							I			
4b. I he any other that would 4c. Cadets for behavi that improp 4d. I un departure f my son/da 4e. TRANS regardless directed by conclusion	aderstand that I am CC and other firea ereby certify that condition, (Includir preclude them fror s are responsible for oral/attitude issues ber conduct resultin derstand that sho for training, that i aughter/ward to pa SPORTATION NO of any state or loc r the CO/COTC. Fi of training. Cade	BY INITIAL authorizing my son/c arms instructors, coar , to the best of n ng but not limited m using a firearm und or maintaining the hig s. I have explained ng from violation of inst ould any disqualifying the unit commandin riticipate in the training TICE: Under NO circ al laws which may all rearms WILL be chee ts will not be respo f training. A violation of	he training requ daughter/ward to ches, safety off ny knowledge, to the followin ler federal regul ghest standards to my child th structions will be ng condition a g officer or C ing requested w zumstances is a llow it. A parent nsible for the	vested by o handle/us icers that my son/d g: depres ations or lo of conduc nat they a e cause for rise (med OTC will ill be cance or guardia CO/COTC custody of	my son/daug se/discharge are attached laughter/ward sison, suicida ocal regulatio tt. In the case are responsit r immediate of lical, physica be notified eled. allowed to tr an may bring f any firearm	hter/ward is in said firearms u to this training I has no med al thoughts or ns where the tra- of marksmansi le for followin iismissal from ti II, mental hea immediately. F ansport ANY fin a firearm with by the parent/g s. By initialing	the use and h nder the superv activity. ical condition, threats, ment- aining is to be h hip/firearms trail g ALL CO/CO he training at my lith or any oth Further, I under rearms to and f them for cadet to guardian and re this box you	ision of adult staff felony conviction al health treatme eld. TC instructions, a y expense. Ter) prior to his/h restand authority from a training eve use at the training turned to them at t (the parent/guardi	s. of or nt) om nd for ent as the	
IF YOUR EN	ROLLMENT HAS E	XPIRED OR WILL EX		THE END	OF TRAININ	G, YOU ARE N	OT AUTHORIZE	D TO REPORT TO	OR PAF	RTICIPATE IN TRAINING
7. ENDORS	EMENTS									
		Parent/Guardian aff information provide						nanship/firearn	ns trai	ning and is capable
The CO/CO	TC endorsement	signifies receipt of t	his form.							
7a. Parent/Guardian (Print or Type)				7b. S	7b. Signature				7	c. Date (DD MMM YY)
7d. CO/COTC (Print or Type)				7e. S	7e. Signature				7	f. Date (DD MMM YY)

NSCTNG 031 (09/20)