

gunrabbi.com

Application and Enrollment

Shalom!

I'm happy that you've chosen the Gun Rabbi to teach you about firearms safety and use.

Safety first! Before accepting you to the class, I need to confirm that you are not a criminal, alcoholic, etc., and I need you to agree to follow all instructions to the letter.

To enroll in your class, please complete the enclosed forms. Except where otherwise stated, all forms and requested information are required. Please print clearly in block letters!

This form gathers contact information.

The second form is the NJ Firearms Permit Application. I have crossed out the sections that are not required. I use this form to screen out candidates whom the State of NJ may deem unsuitable for firearms ownership. I apologize in advance for some questions which may seem intrusive, but you surely would not want the person next to you in class to have a history of alcoholism or violence, so please take the questionnaire seriously and *please expect that I will contact your references.*

The third form is a Waiver and Release. A mishandled firearm is potentially dangerous, and this form protects me from liability for your potential mishandling. In addition, this form includes a statement of confidentiality.

Thank you, and I look forward to seeing you in class!

Name:

Nickname / Preferred Name (How do you want to be called in class?):

Please carefully print your name as you want it to appear on your class certificate. If you plan to use your certification to apply for a CCW, this should match your driver's license or other legal identification:

Address:

Phone:

E-mail:

Are you an NRA member? Yes No Membership #:
(This information is optional. The NRA keeps track of the certifications of its members. Providing your NRA membership number will allow me to submit the certification to your NRA membership record.)

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How did you hear about this class?

Briefly describe any prior firearms experience:

Do you currently own your own gun(s)? If so, please list guns and calibers:

Will you be bringing your own gun for use in class? If yes, please list gun and caliber:

Briefly state why you are interested in this class:

Women: Are you pregnant or nursing? Yes No

If you are pregnant or nursing, you may come to the classroom portion to learn proper firearm safety and have the general orientation. However, due to potential lead exposure, live fire exercises are not recommended for pregnant or nursing women. If this section applies to you, please discuss with me privately prior to coming to class. Learning firearms safety applies to everyone, and I want to provide you with an opportunity to do so, especially if there is already a firearm in your home; but a class that includes live fire exercises during which you'll need to step out may not be the best venue for you to do so.

Payment in full is required before the class begins.

Expected method of payment: Cash Check Credit Card via PayPal

If by check, please send all your forms and your check to:

Pidyon, Inc.
184 South Livingston Ave.
Suite 9-246
Livingston, NJ 07039

If you plan to pay by cash or PayPal, you can fax your forms to 646-292-5192, or you can scan and e-mail to rabbi@gunrabbi.com.

Thank you! I look forward to meeting you in class.

	STATE OF NEW JERSEY
	<input type="checkbox"/> Application for Firearms Purchaser Identification Card <input type="checkbox"/> Application to Purchase a Handgun Amount of permits being applied for: _____

(1) Last Name (If female, include maiden) First	Middle	(2) Resident Address (Number - Street - City - State - Zip)
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(3) Date of Birth Month / Day / Year	(4) Age	(5) U.S. Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No	
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(11) Occupation	(12) Home Telephone () -	(15) If you possess a N.J. Firearms Purchaser ID Card, list the number
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(16) Have you ever been adjudged a juvenile delinquent?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, List Date(s)	Place(s)	Offense(s)
(17) Have you ever been convicted of a disorderly persons offense, that has not been expunged or sealed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, List Date(s)	Place(s)	Offense(s)
(18) Have you ever been convicted of a criminal offense that has not been expunged or sealed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, List Date(s)	Place(s)	Offense(s)
(19) Have you ever had a firearms purchaser identification card, permit to purchase a handgun, or permit to carry a handgun refused or revoked?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, By Whom?	When?	Where Why?
(20) Have you ever had an Employee of Firearms Dealer License refused or revoked?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, By Whom?	When?	Where Why?
(21) Are you an Alcoholic?	<input type="checkbox"/> Yes <input type="checkbox"/> No	(22) Have you ever been confined or committed to a mental institution or hospital for treatment or observation of a mental or psychiatric condition on a temporary, interim or permanent basis? If Yes, give the name and location of the institution or hospital and the date(s) of such confinement or commitment.		
(23) Are you dependent upon the use of any narcotic or other controlled dangerous substance?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
(24) Are you now being treated for a drug abuse problem?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
(25) Do you suffer from a physical defect or sickness?	<input type="checkbox"/> Yes <input type="checkbox"/> No	(25) Have you ever been attended, treated or observed by any doctor or psychiatrist or at any hospital or mental institution on an in-patient or outpatient basis for any mental or psychiatric conditions? If Yes, give the name & location of the doctor, psychiatrist, hospital or institution and the date(s) of such occurrence.		
(26) Do you suffer from a physical defect or sickness?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
(27) If answer to question 26 is yes, does this make it unsafe for you to handle firearms? If not, explain.	<input type="checkbox"/> Yes <input type="checkbox"/> No	(28) Are you subject to any court order issued pursuant to Domestic Violence? If yes, explain.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
(29) Have you ever been convicted of any domestic violence in any jurisdiction which involved the elements of (1) striking, kicking, shoving, or (2) purposely or attempting to or knowingly or recklessly causing bodily injury, or (3) negligently causing bodily injury to another with a weapon? If Yes, explain.				<input type="checkbox"/> Yes <input type="checkbox"/> No
(30) Are you presently, or have you ever been a member of any organization which advocates or approves the commission of acts of violence, either to overthrow the government of the United States or of this State, or to deny others of their rights under the Constitution of either the United States or the State of New Jersey? If yes, list name and address of organization(s) here:				<input type="checkbox"/> Yes <input type="checkbox"/> No

(31) Names & Addresses of two reputable persons who are presently acquainted with the applicant, other than relatives:		
Name	Address	Telephone Number
A. _____	_____	_____
B. _____	_____	_____

APPLICANT: DO NOT WRITE BELOW THIS SPACE	
A non-refundable fee of \$5.00 for a Firearms Purchaser Identification Card or \$2.00 for each Permit to Purchase a Handgun, payable to either the Superintendent of State Police or the Chief of Police in the municipality in which you reside, must accompany this application.	
APPROVED	IDENTIFICATION CARD/PERMIT NUMBER(S)
<input type="checkbox"/>	
DISAPPROVED	Reason for Disapproval
<input type="checkbox"/>	<input type="checkbox"/> A. CRIMINAL RECORD
<input type="checkbox"/>	<input type="checkbox"/> B. PUBLIC HEALTH SAFETY AND WELFARE
<input type="checkbox"/>	<input type="checkbox"/> C. MEDICAL, MENTAL OR ALCOHOLIC BACKGROUND
<input type="checkbox"/>	<input type="checkbox"/> D. NARCOTICS/ DANGEROUS DRUG OFFENSE
<input type="checkbox"/>	<input type="checkbox"/> E. FALSIFICATION OF APPLICATION
<input type="checkbox"/>	<input type="checkbox"/> F. DOMESTIC VIOLENCE
<input type="checkbox"/>	<input type="checkbox"/> G. OTHER (SPECIFY) _____
GRANTED ON APPEAL	
<input type="checkbox"/>	

I hereby certify that the answers given on this application are complete, true and correct in every particular. I realize that if any of the foregoing answers made by me are false, I am subject to punishment.

(27) _____
Signature of Applicant Date of Application

(The disclosure of my social security number is voluntary. Without this number, the processing of my application may be delayed. This number is considered confidential.)

Falsification of this form is a crime of the third degree as provided in NJC 26:99-10c.

APPLICANT: DO NOT WRITE BELOW THIS SPACE

This _____ Day of _____, 20____

Signature _____ Title _____

Department of Police

**RELEASE, WAIVER, INDEMNIFICATION, HOLD HARMLESS, AND ASSUMPTION OF
RISK AGREEMENT;
CONFIDENTIALITY AND PRIVACY AGREEMENT;
AGREEMENT TO ABIDE BY SAFETY PROCEDURES;
AGREEMENT TO DISPUTE RESOLUTION**

WHEREAS, in consideration of being permitted to attend a Course for Instruction in firearms, for the Instruction in firearms, for use of Premises, for use of firearms and/or ammunition (if applicable) and for other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, Undersigned agrees to the following:

Release, Waiver, Indemnification, Hold Harmless, and Assumption of Risk: Undersigned agrees to indemnify, hold harmless and defend **David Bendory** (hereinafter referred to as "**Instructor**"), from any and all fault, liabilities, costs, expenses, claims, demands, or lawsuits arising out of, related to or connected with: Undersigned; Undersigned's presence on or use of the range, building, land, and premises ("Premises"); any and all acts or omissions of Undersigned; and Course of Instruction provided to Undersigned. This includes but is not limited to claims against Instructor resulting from Course of Instruction and/or Undersigned's dependence on and/or application of said Instruction, whether during Instruction or at any time in the future.

Undersigned furthermore waives for himself/herself and for his/her executors, personal representatives, administrators, assignees, heirs and any next of kin; any and all rights and claims for damages, losses, demands and any other actions or claims whatsoever, which he/she may have or which may arise against Instructor (including but not limited to the death of Undersigned and/or any and all injuries, damages or illnesses suffered by Undersigned or Undersigned's property), which may, in any way whatsoever arise out of, be related to or be connected with: the Course of Instruction; the Premises, including any latent defect in the Premises; Undersigned's presence on or use of said Premises; Undersigned's property (whether or not entrusted to Instructor); firearms and/or ammunition(s), including any latent defect in the firearms and/or ammunition(s); Undersigned's use of firearms and/or ammunition(s); and the discharge of firearms. Instructor shall not be liable for, and Undersigned, on behalf of himself/herself and on behalf of his/her executors, personal representatives, administrators, assignees, heirs, and next of kin, hereby expressly releases the Instructor from any and all such claims and liabilities.

Undersigned hereby expressly assumes the risk of taking part in the Course for Instruction in firearms and taking part in the activities on the Premises, which include, but are not limited to, instruction in the use of firearms, the discharge of firearms and the firing of live ammunition.

Undersigned hereby acknowledges and agrees that Undersigned has read this instrument and understands its terms and is executing this instrument voluntarily. Undersigned furthermore hereby acknowledges and agrees that he/she has read, understands and will at all times abide by all range rules and procedures and any other rules and procedures stated by the Instructor.

Undersigned expressly agrees that this instrument is intended to be as broad and inclusive as permitted by law, and that if any provision of this instrument is held invalid or otherwise unenforceable, the enforceability of the remaining provisions shall not be impaired thereby. No remedy, and each and every remedy shall be cumulative and shall be in addition to every other remedy now or hereafter existing at law or in equity or by statute or otherwise. The election of any one or more remedies hereunder by the Instructor shall not constitute any waiver of Instructor's right to pursue other available remedies. This instrument binds Undersigned and his/her executors, personal representatives, administrators, assignees, heirs and next of kin.

Safety Provisions and Refunds: Undersigned agrees to follow all safety and handling directives given by Instructor. Undersigned understands and agrees that Instructor may remove undersigned from class or range at any time for behavior that Instructor in his sole judgement finds inappropriate, unsuitable, uncondusive to learning, or dangerous. Undersigned understands and agrees that if removed from class or range, undersigned will not be issued a refund nor will any certificates or certifications be given for the class.

Privacy and Confidentiality: Instructor will keep all information regarding Undersigned or his/her participation in the Course of Instruction confidential except for information necessary to complete the Course and related documentation. FOR NRA COURSES ONLY: By registering in the Course, Undersigned consents to disclosure of necessary enrollment information to the National Rifle Association ("NRA"). This information currently includes Name, Address, Phone, E-mail, Date of Birth, Gender, NRA Membership Number, and Special Needs. Disclosure of NRA Number and E-mail are optional; Undersigned may request that this information not be disclosed to the NRA by striking it from mention in this paragraph. Instructor is not responsible for NRA's use (or potential misuse) of said information.

By registering in the Course, Undersigned consents to disclosure of necessary information required for range use. Instructor will inform undersigned of any such disclosure. (Not all ranges require information.) Instructor is not responsible for range's use (or potential misuse) of said information.

Undersigned additionally agrees that Instructor may contact his/her provided references ("References") prior to accepting Undersigned's enrollment. Instructor may disclose any information in the application to References for the purpose of determining if Undersigned is an unsuitable participant in the Course.

Instructor shall keep all information confidential within the parameters of the above detailed disclosures, the *halachos* of *Lashon HaRa* (Jewish Laws of Proper Speech and Confidentiality), and *Dina d'Malchusa Dina* (Jewish Laws requiring adherence to US Law).

At any time after the Course is completed and all certifications are issued, Undersigned may request that Instructor destroy records of collected information. On receipt of such request, Instructor will either shred or return to Undersigned any printed copies of such information and shall delete known electronic records. Undersigned recognizes that electronic copies of such information may continue to exist on backups or internet servers involved in transmitting such information and exempts Instructor from attempting to destroy such records. *Exception:* Instructor may keep a copy of this agreement, in electronic or physical form, in perpetuity.

Disputes: Undersigned and Instructor agree that any disputes which arise between them that cannot be resolved amicably will be resolved in an *Orthodox Beis Din* (Orthodox Rabbinical Court). The *Beis Din* used shall be the *Beis Din d'America* and it will settle matters via *p'sharah*, *seiruv*, or any other means as determined by the *Beis Din*. Undersigned and Instructor agree to be bound by *Beis Din* and shall not use *Erkaos Akum* (Secular Court or Legal Proceedings).

Longevity and Durability: This agreement shall apply not only to the designated class(es) listed below but to all future classes and / or private lessons given by Instructor to Undersigned. This agreement shall remain in effect for all such future classes or lessons, whether at the same or other locations, whether including the same or other Range Safety Officers, unless either Undersigned or Instructor specifically notifies the other in writing of the termination of this agreement. Upon such notification, this agreement shall cease to apply to future classes or lessons, but its terms shall remain binding for all prior sessions.

Class:
Cost: \$
Date of Class:
Location of Class:
Range Used:
Range Safety Officer:

Signed:

Signed on Date:

Printed Name: