# **Firearms Safety course**



Held in EMERALD by LENNON TRAINING RTO#1674

2024 course dates (Category AB) (Category H):

Saturday 13th JulySaturday 10th AugustSaturday 07th SeptemberSaturday 19th OctoberSaturday 09th NovemberSaturday 07th December

Course fees: \$144 for Cat AB and \$144 for Cat H Combo price: \$166 for Categories ABH \$30 discount for EPC financial Club Members

2024 course dates (Category C):

Saturday 13th JulySaturday 10th AugustSaturday 07th SeptemberSaturday 19th OctoberSaturday 09th NovemberSaturday 07th December

Course fees: \$265 for Category C \$30 discount for EPC financial Club Members

Bookings essential. Contact us for further information.

## (07) 4982 0188 or admin@lennontraining.com

This course is a key part to obtaining your firearms licence in QLD ^

## **11029NAT – Course in Firearms and Weapons Safety** (approved for firearms licensing in Queensland)

^ Note: persons 11 to 17 years of age may apply for a Minor's Licence.
 A minor cannot acquire a firearm on this licence. Section 23 and 23(1)A of the Weapons Regulations 1996 provide guidelines for acquisition of a Minor's Licence.

**Notice to Club members:** On the above dates, from 12.30pm until approx. 4pm please welcome these trainees who will be conducting their practical at Range 2 or 3.

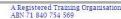
07 4982 0188

Lennon Training Emerald

WWW.lennontraining.com

admin@lennontraining.com





## **Qualification:** 11029NAT Course in Firearms and Weapons Safety (approved for firearms licensing in Queensland)

**Descriptor:** This course is a pre-requisite by the Queensland Police Weapons Licensing Branch for acquiring a firearms licence and contains information about specific safety issues related to firearms and your responsibilities under relevant Queensland legislation.

The above course is open to all persons in Queensland seeking Weapons Act licence/s who are eligible to obtain such licence/s. Given the nature of the course, the requirement to handle firearms and understand the relevant legislation, Lennon Training have the below process in place. These competencies comply with the Australian Qualifications Framework (AQF) and therefore, a nationally recognised statement of attainment will be issued on successful completion.

#### Units of Competency within Qualification framework of accredited course 11029NAT:

Schedule	Unit Type	Unit Code	Unit Title
Day 1	Core	NAT11029001	Demonstrate knowledge of weapons legislation, weapons and
		NAT11025001	community safety
Day 1	Elective	NAT11029003	Use Category C firearms safely lawfully, safely and responsibly

#### Assessment requirements:

• Candidates must complete all assessment items to a satisfactory standard in order to be deemed competent. This may take the form of written, practical and/or interview.

#### **Overview of assessment:**

Unit Code	Unit Title	Example of Assessment Tasks	
NAT11029001	Demonstrate knowledge of weapons legislation,	Multiple choice & short answer assessment	
NAT11029001	weapons and community safety	Practical demonstration to the Facilitator	
NAT11029003	Use Category C firearms safely lawfully, safely and	Multiple choice & short answer assessment	
NAT11029005	responsibly	Practical demonstration to the Facilitator	

**LLN entry requirements:** Level 2 as outlined on page 15 of this information guide. A scribe is available for assistance **BUT MUST BE BOOKED AHEAD**. Please contact our office should you require this service.

#### Pre-requisites:

- Complete the pre-enrolment eligibility (Form 33) and the booking enrolment form available from Lennon Training
- Physical ability
- Effective communication

Vocational outcome: pending genuine reason for acquiring licence

Useful link for more information about the Queensland Weapons Licensing Branch: http://www.police.qld.gov.au/programs/weaponsLicensing/



#### **Enrolment Application**

Admin use: Col [ ] JP b&w [ ]

Deposit (circle): cash / EFTPOS / Credit card date/initial:.....

COURSE DETAILS	Upon successful completion, you may be issued the following:
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A Registered Training Organisation ABN 71 840 754 569

Occasionally for the purposes of training, monitoring compliance or to enhance safety and educational messages, the digital recording may be undertaken during class. Such data will be used by Lennon Training exclusively. If you do not give approval to be recorded, please indicate here  $\Box$ 

		Date of preferred course:						
Course: Unit/s:	Emerald Firearms Safety course \$265 (inc \$3.10 gst) (Category C)			NAT11029001 & NAT11029003				
Qual:		in partial completion of 11029NAT Course in Firearms and Weapons Safety (approved for firearms licensing in Queensland)						
	PAYMENT DETAILS				ils & updat			·
Address for t (list Property of	r PO Box if applicable)	:						
Section 2 – Y	OUR DETAILS	Nan	ne to matcl	h ID. Ch	eck your d	etails & up	date as req	luired
Gender (circl	le):	Male	Female	Othe	-			
First name:								
Middle name	e (optional):							
Surname/Fai	mily name:							
Unique Stud	ent Identifier (USI)	)?						
This will be 1	0 characters long	& you wou	ıld have cre	eated it at	www.usi.go	ov.au		
Date of birth	(dd/mm/yy):	1	I	I		1	1 1	
Your contact	phone:							
Your usual re	esidential address	(use your Str	eet address,	Suburb/Tow	n, State, Post	code. This is	not your PO	Box):
Certs are iss	ued electronically	unon sunr	olv of valid	IISI & nav	ment term	s heina me	·····	
	il address/es:	upon supp	ny oj vana	osi a puy		being me		
Is there anyone	e else to be included?							
For each que	stion below circle or	tick respon	se that best	describes y	ou. Provide	additional in	formation as	required
Were you born	in Australia?			-				
Yes	No If	no; which co	untry?					
Are you of Abo No	riginal or Torres Strait Yes (Both)	: Islander orig Yes (Aborigin		Yes (Torres S	Strait Islande	r)		
At home, do yo No	u speak a language of Yes If	-	-	e				
What is your hi Still at school	ghest completed scho Year 12 Year 11		-	e r equivalent	Year 8 or	equivalent	Did not go	to School



#### **Enrolment Application**

Have y	ou successfully com	npleted any of the listed q	ualifications?			
No	If yes, tick ANY	[] Bachelor or higher degree		[] Cert IV (or advanced	[] Certificate II	
.,	applicable =>	[ ] Advanced diploma or associate degree [ ] Diploma (or associate diploma)		certificate/technician)	[] Certificate I	
Yes				[] Cert III (or trade cert)	[] Other, inc International	
Of the	following categorie	s, which best describes yo	our current employn	nent status?		
[] Full-time employee		[] Employed – unpaid worker in a family business				
[]	Part-time employe	e	[] Not employ	ed – not seeking employme	ent	
[] Self employed – not employing others		[] Unemployed – seeking full-time work				
[]	[] Self employed – employing others		[] Unemployed – seeking part-time work			
Of the	following categorie	s, which best describes th	e main reason you a	are undertaking this course	(Tick ONE box only)	
[] To get a job			[ ] It was a requirement of my job			
[] To develop my existing business		sting business	[] I wanted extra skills for my job			
[] To try for a different career		[] To get into another course of student				
[] To get a better job or promotion		[] For personal interest or self-development				
			[] Other reasons			
Do you	consider yourself t	o have a disability, impair	ment or long term of	condition? Refer disability supp	lement if explanation required	

No	If yes, tick ANY	[] hearing/deaf	[] vision	[] intellectual	[] other
	applicable =>	[] learning	[] mental	[] acquired brain impairment	
		[] physical	[] medical condition		

#### Section 3 – STUDENT DECLARATION

I recognise that it is my responsibility to provide all necessary documentary evidence relevant to the above-mentioned training. I authorise the issuing organisation to verity with Lennon Training the authenticity of any qualification I have submitted to Lennon Training as part of my application.

I declare that the information I have provided to the best of my knowledge is true and correct.

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I consent to the collection, use and disclosure of my personal information in accordance with the Privacy Notice (see below)

Applicant's signature	// Today's Date
Parent/Guardian signature (for applicants under 18 years)	// Today's Date

#### Section 4 – PRIVACY NOTICE

Under the *Data Provision Requirements 2020*, Lennon Training is required to collect personal information about and to disclose that personal information to the National Centre for Vocation Education Research Ltd (NCVER).

The Data Provision Requirements 2020 clarify what information must be provided to the Australian Skills Quality Authority (ASQA) and reduce duplication to help registered training organisations (RTOs) meet their existing obligations.

Your personal information (including the personal information contained on this enrolment form and your training activity data) may be used or disclosed by Lennon Training for statistical, regulatory and research purposes.

Please refer to Schedule 1 v3 of the National VET Data Policy that is available in your training course today.

#### **FORM 33**

#### QUEENSLAND Weapons Act 1990 Section 53

#### DECLARATION BY UNAUTHORISED PERSON FOR USE OF A WEAPON AT AN APPROVED RANGE

Ver. 3 — 07/04/09  $$\Delta 2$$ 

1. PERSONAL	DETAILS	
Please use BLOCK LETTERS	Family name	
	Given name(s)	
Duravida dataila	Date of birth	
Provide details and supporting evidence if your name has changed	Day     Month     Year       Town of birth     Image: Comparison of the second seco	
due to: • marriage • deed poll, etc.	Country of birth	
	Drive licence no.	
2. RESIDENTIA	L DETAILS	
Do not use PO Box for	Current address	
residential address. Lot on plan (RP No.)	Property name/	
can be found on rates notice.	Street number and name     Image: Image	
	Suburb/Locality	
	State Postcode How long have you lived at this address?	
	Postal Address (If different from above)	ears Months
	Postal address (e.g. PO Box)	
	Suburb/Locality	
	State Postcode	
3. WEAPONS L		
Only complete if you currently hold a weapons licence.		
weapons weenee.	(Only one required) Date issued	
	Day Month Year Day Month	Year
4. UNLICENSED	Have you in Queensland or elsewhere been convicted of:	
Only complete if you do not hold a	murder or manslaughter; or     armed robberv; or	
weapons licence.	unlawful wounding; or	
	<ul> <li>grievous bodily harm; or</li> <li>an offence involving drugs, weapons or violence that is prescribed under a regulation punishable by at least 7 years imprisonment.</li> </ul>	Yes No
	Have you in the last 5 years, been convicted of, or discharged from custody on sentence after	
	<ul><li>being convicted of any of the following?</li><li>offence relating to the misuse of drugs;</li></ul>	
	<ul> <li>offence involving the use or threatened use of violence;</li> <li>offence involving the use, carriage, discharge or possession of a weapon.</li> </ul>	Yes No
	Have you in the last 5 years been subject to a domestic violence order, other than a temporary protection order?	Yes No
	Are you currently subject to a temporary protection order?	Yes No
	Are you prevented by an order of a Queensland or another court outside of Queensland from holding a licence or possessing a weapon unless the order permits such under supervision?	Yes No
	Have you in the last 5 years been subject to an involuntary assessment order under the <i>Mental Health Act 2000</i> , or similar order under the <i>Mental Health Act 1974</i> , or a similar order in another state?	Yes No
	Have you ever been refused a licence or has your licence been revoked in the last 5 years?	Yes No
	Has your licence been suspended?	Yes No

Place a cross 💹 in applicable box(es).	Please state which category of weapon you intend to possess and use on an approved range under supervision. A B C D E H M R				
	CATEGORY 'A' WEAPONS CATEGORY 'H' WEAPONS				
	<ul> <li>Air rifles;</li> <li>Rimfire rifles (other than self-loading);</li> <li>Single and double barrel shotguns;</li> <li>All concealable firearms less than 75 cm in length.</li> </ul>				
	<ul> <li>Miniature cannon under 120 cm in barrel length that is a black powder and muzzle loading cannon, depicting a scale model of an historical artillery piece or naval gun.</li> <li>CATEGORY 'M' WEAPONS As contained in Section 7A(n) of the Weapons Categories Regulation 1997</li> <li>Any crossbow designed to be discharged by the use of two hands that, when discharged, is capable</li> </ul>				
	CATEGORY 'B' WEAPONS of causing damage or injury to property or capable of causing bodily harm.				
	<ul> <li>Muzzle loading firearms;</li> <li>Single, double and repeating centrefire rifles.</li> </ul>				
6. SIGNATURE (	DF UNAUTHORISED PERSON				
DECLARATION					
I declare that the in provisions of Secti	formation I have given is true and correct in every detail and that I am not an excluded person under the on 53 of the <i>Weapons Act 1990</i> .				
	Day Month Year				
	Time am/pm				
	ature of applicant				
4. RANGE OFFI					
Photo ID includes, but is not limited to; • Driver licence	I have inspected the above named person's photographic identification. Yes No				
<ul> <li>Passport</li> <li>18+ Card</li> </ul>	Type of ID				
<ul> <li>Weapons Licence</li> <li>Student ID Card</li> </ul>					
	I have also inspected the above named person's weapons licence. N/A Yes No				
	I am satisfied				
	• that the person signing the approved form appears to be the person shown in the photographic identification; <b>AND</b>				
	• that after inspecting the completed approved form, that the information in this form agrees with the information shown on the above named person's photographic identification; AND.				
	that the person is a licensee or is not an excluded person.     Yes     No				
	DECLARATION				
	I declare that the information I have given is true and correct in every detail.				
	Range Officer's signature Day Month Year				
	Range Officer's ID				

Privacy Collection Statement The collection of this information is authorised by the Weapons Act 1990. The information will be used for the administration and enforcement of the Weapons Act 1990. The information you provide will not be used or disclosed without your consent unless such use or disclosure is authorised or required by law, including the Weapons Act 1990 (Qld), Police Service Administration Act 1990 (Qld) and the Information Privacy Act 2009 (Qld). You have a right to access personal information that the QPS holds about you, subject to any exceptions in relevant legislation. If you wish to seek access to your personal information or inquire about the handling of your personal information, please contact PSBA Right to Information and Privacy by email at rti@police.qld.gov.au or by telephone 07 3364 4666.



A Registered Training Organisation ABN 71 840 754 569

WHO IS THIS FOR?	CREDIT CARD DETAILS	PURCHASE ORDER DETAILS		
Provide either your online booking reference:	Total fees authorised: \$	Please provide details as requested below and email to admin@lennontraining.com		
	Name on card:	Compony normal		
Or provide the name of student and course <b>date</b>	Card Number:	Company name:		
Student name:				
Course date:	Expiry (mm/yy): CCV:	PO ref:		
	Notes on this payment method:	Name of person submitting this PO:		
Please provide details as requested below	1. EFTPOS are also accepted on day of enrolment			
and email to admin@lennontraining.com	<ol> <li>UnionPay International will incur 2.2% merchant fee.</li> <li>Credit cards NOT accepted: Amex, Diners, JCB</li> </ol>			

### **PAYMENT INFO**

To secure a spot, payment details must be confirmed using this payment form. Fees for training will be deducted on the day of enrolment. Payment can be made via cash, direct debit or credit card. **AMEX, Diners or JCB cards are <u>NOT</u> <b>accepted so please don't write them down**.

To be approved for credit (Purchase Orders), your Company is to provide Trade references and pay according to the 7 day payment terms set by Lennon Training and not by your Company. Accounts not paid within the payment terms may incur penalty fees and further credit may be refused. Please contact Lexia on (07) 4982 0188 with your enquiry/request.

More information about our Fees and Charges policy, Refund policy and Application for refund can be found on our website <u>www.lennontraining.com/forms-and-policies</u>