Range Officer Application

Honey Island Shooting Range

Operated by Southeast Louisiana Firearms Safety, Inc.

An NRA Affiliate serving the public since 1993

Sponsored By: Downloaded from the Honey Island Website Date Submitted: _____

I hereby apply to become a Range Officer at the Honey Island Shooting Range. I understand that my application must be approved by the Board of Directors of Southeast Louisiana Firearms Safety, Inc. (SELFS, Inc.), which will consider my application after I have completed all requirements to be a Board-Certified Range Officer.

PLEASE READ INSTRUCTIONS AND COMPLEATE LEGIBLY!

Name _____ Date of Birth _____

Mailing Address _____

City _____ State _____ Zip Code _____

Phone (Primary) _____ (Secondary) _____

E-mail Address _____

Business Affiliation _____

NRA ID Number _____ Expiration Date _____

Do you possess any special qualifications or abilities to assist us? _____

_____

Are there any conditions that would limit your ability to work as a Range Officer after qualification?

_____

PLEASE PLACE YOUR INITIALS NEXT TO EACH STATEMENT BELOW.

_____ If approved, I agree to maintain my status as a Range Officer as required by the Bylaws of SELFS, Inc., contribute at least 5 hours per month of public service, and conduct myself accordingly as a representative of SELFS, Inc. to this public. I agree to abide by the range rules as approved by the Board of Directors and Range Master. I agree to uphold the Bylaws of SELFS, Inc. and agree to resign if I fail to do so or have my Range Officer status terminated in accordance with the Bylaws.

_____ I am not a convicted felon and I am not prohibited from owning or possessing a firearm.

Signature _____Date _____

Fixed Reimbursement Agreement

The undersigned applicant agrees to join Southeast Louisiana Firearms Safety, Inc. (SELFS, Inc.) as a “Fixed Reimbursement Member: under the terms described herein.

1 Range Officers receive a reimbursement payment for each shift worked at the range. This payment is to help offset incurred expenses. This STANDARD reimbursement consists of a mileage reimbursement based on Federal guidelines plus a per diem payment.

2 In the past, the cost of this STANDARD reimbursement has limited the number of Range Officers that SELFS, Inc. could accept.

3 To overcome this limit, SELFS, Inc. has established a FIXED REIMBURSEMENT RANGE OFFICER to allow more Range Officers to volunteer at the range.

4 As a FIXED REIMBURSEMENT RANGE OFFICER, the undersigned agrees to receive a reimbursement payment fixed at $5.00 for each shift worked at the range as a Range Officer.

   a. This FIXED REIMBURSEMENT will be in lieu of receiving the STANDARD reimbursement described in section 1 above.

   b. Training shifts worked by an applicant do not qualify for reimbursement.

5. SELFS, Inc. has 80 STANDARD reimbursement Range Officer positions. This number is subject to change by a vote of the Board of Directors.

6. The number of FIXED REIMBURSEMENT RANGE OFFICERS is based on need and is set by the Board of Directors.

7. Whenever a vacancy occurs in the STANDARD reimbursement allotment, a FIXED REIMBURSEMENT RANGE OFFICER will fill it based on tenure (thereby changing that Range Officer from FIXED to STANDARD reimbursement).

8. FIXED REIMBURSEMENT RANGE OFFICERS may, on occasion, receive STANDARD reimbursement for shifts worked if the Board of Directors determines that it is financially feasible based on the fiscal plans and objectives of SELFS, Inc.

9. Other than the difference in the method of reimbursement, a FIXED REIMBURSEMENT RANGE

10. OFFICER enjoys all of the rights, privileges, and obligations of a STANDARD REIMBURSEMENT RANGE OFFICER.

Printed Name _____

Signature _____ Date _____

Return both pages to:

SELFS, Inc.
ATTN: Membership Committee
P.O. Box 5159
Slidell, Louisiana 70469-5159

Application Instructions

This application is available in either printed or fillable PDF form.

If you received this application in printed form please fill it out LEGIBLY so that we have the correct information including your name, address, telephone number and e-mail address. You can then mail it to the address on the application.

If you received this application by e-mail or downloaded it from the Honey Island web site it is a fillable PDF form. It can be opened and completed with the Adobe Acrobat Reader application from https://get.adobe.com/reader/ You may type your name on the form in the signature block. When you have completed the form select "File ==> Save As..." and save the file on your hard drive. You can then print and mail it to the address on the application.