



CONSENT FORM

A CONSENT FORM ACKNOWLEDGES THAT THE TWO INDIVIDUALS, RESIDING IN THE SAME HOUSEHOLD, INVOLVED IN THE TRANSACTION, BOTH TAKE RESPONSIBILITY IN CO-REGISTERING & CO-OWNING THE FIREARM(S) INDICATED.

I, _____, _____, _____
(NAME OF PERSON GRANTING CONSENT) *** signature required below*** (PP #) (ISSUE DATE)

residing at _____
(ENTIRE MAILING ADDRESS)

do hereby give permission for the following pistols to be co-registered

MAKE	REVOLVER OR AUTOMATIC	MODEL	CALIBER	SERIAL #

with _____, _____, _____
(NAME OF CO-REGISTRANT) (PP#) (ISSUE DATE)

residing at _____
(ENTIRE MAILING ADDRESS)

• • • • • • • • • • • • • •

SIGNATURE OF PERSON GRANTING CONSENT

SUBSCRIBED AND SWORN TO ME THIS _____ DAY OF _____ OF THE YEAR _____.

(NOTARY SIGNATURE)