



# National School Shield™ Security Assessor Training Participant Application Form

NRA Use Only

COURSE I.D.

20190008

Thank you for your interest in attending the National School Shield's Security Assessor Training. Due to the nature of this training, only designated law enforcement officials with 3+ years of service are eligible to participate. Please complete this form in its entirety and submit as directed with all supporting materials as requested. Be advised - class size is limited. Submission of your application does not guarantee admittance to the training. A registration confirmation will be provided via email upon receipt and approval of a completed application.

## Eligibility Questionnaire

To confirm your eligibility to attend this training, please select the one (1) statement below that best reflects your status:

- I AM CURRENTLY A SWORN PUBLIC LAW ENFORCEMENT OFFICER EMPLOYED BY A STATE, COUNTY, MUNICIPAL, OR OTHER GOVERNMENT LAW ENFORCEMENT AGENCY.
- I AM CURRENTLY A SCHOOL LAW ENFORCEMENT/SECURITY OFFICER EMPLOYED BY A SCHOOL/SCHOOL DISTRICT OR A STATE/COUNTY/MUNICIPAL LICENSING BOARD/AGENCY.
- I AM NOT A SWORN PUBLIC LAW ENFORCEMENT OFFICER OR A SCHOOL LAW ENFORCEMENT/SECURITY OFFICER HOWEVER I AM ASKING FOR DISCRETIONARY ACCEPTANCE.

For your selection above, please complete the following and attach a legible copy of your law enforcement photo ID and/or credentials.

NUMBER OF YEARS OF TOTAL SERVICE: \_\_\_\_\_

If you are asking for discretionary acceptance, please describe relevant professional duties to warrant participation below:

\_\_\_\_\_

## Applicant Information

FIRST NAME	LAST NAME	NICKNAME
<input type="text"/>	<input type="text"/>	<input type="text"/>
WORK PHONE	CELL PHONE	
<input type="text"/>	<input type="text"/>	
WORK EMAIL	PERSONAL EMAIL	
<input type="text"/>	<input type="text"/>	

## School Information

SCHOOL NAME	SCHOOL STREET ADDRESS	
<input type="text"/>	<input type="text"/>	
SCHOOL CITY	SCHOOL STATE	SCHOOL ZIP
<input type="text"/>	<input type="text"/>	<input type="text"/>

## Agency Information

AGENCY NAME	AGENCY STREET ADDRESS	
<input type="text"/>	<input type="text"/>	
AGENCY CITY	AGENCY STATE	AGENCY ZIP
<input type="text"/>	<input type="text"/>	<input type="text"/>



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## RELEASE, WAIVER, INDEMNIFICATION, HOLD HARMLESS, AND ASSUMPTION OF THE RISK AGREEMENT

WHEREAS, in return for instruction, use of premises, and for other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the Undersigned agrees to the following:

The Undersigned shall **indemnify, hold harmless, and defend** the National Rifle Association of America and its affiliated entities, including but not limited to The NRA Foundation, Inc., and any of their employees, directors, trustees, officers, contractors, agents and any person or entity similarly situated to any of the foregoing, (individually and collectively "NRA"), from and against any and all fault, liabilities, costs, fees, expenses, claims, remedies, demands, actions, lawsuits, or any similar matters arising out of or related to: the course of instruction; the Undersigned's participation in the course of instruction; buildings, land, and premises used for the course of instruction (individually and collectively, the "Premises"); the Undersigned's presence on or use of said Premises; and any and all acts or omissions of the Undersigned. Should any such matter arise or be asserted in any way whatsoever related thereto, under any theory of law or equity, the Undersigned will **indemnify, hold harmless, and defend** NRA, from any and all costs, expenses, or liability including, but not limited to, the cost of any settlement or judgment made or rendered against NRA, together with all court costs and other costs or expenses incurred in connection with any such matter, including attorney's fees.

The Undersigned furthermore **waives** for himself/herself and his/her executors, administrators, assignees, or heirs, any and all rights and claims for fault, liabilities, costs, fees, expenses, claims, remedies, demands, actions, lawsuits, or any similar matters, which he/she may have or which may arise against the NRA, (including, but not limited to any and all injuries, damages, or illnesses suffered by the Undersigned or the 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; the Undersigned's presence on or use of said Premises; or the Undersigned's property (whether or not entrusted to the NRA). **NRA shall not be liable** for, and the Undersigned, on behalf of himself/herself and his/her executors, administrators, assignees, or heirs, hereby expressly **releases** NRA from any and all such claims.

The Undersigned hereby expressly assumes the risk of entering the Premises and of taking part in activities on the Premises.

The Undersigned furthermore hereby acknowledges and agrees that he/she will at all times abide by all NRA rules, procedures, and instruction.

This instrument binds the Undersigned and his/her executors, administrators, assignees, or heirs.

In the event that any portion of this document is deemed unenforceable, the other portions shall be enforced in a manner which best serves the original intent of the parties.

## AFFIRMATION FOR ALL APPLICANTS

I AFFIRM THE FOLLOWING: I AM A CITIZEN OF THE UNITED STATES OR A LAWFUL PERMANENT RESIDENT OF THE UNITED STATES; I MAY LAWFULLY ATTEND THIS SCHOOL AND LAWFULLY RECEIVE ASSISTANCE, TRAINING, DATA, AND INFORMATION REGARDING LAW ENFORCEMENT TECHNIQUES AND EQUIPMENT; I UNDERSTAND THAT UPON SUCCESSFUL COMPLETION I CAN BECOME CERTIFIED AS A NATIONAL SCHOOL SHIELD SECURITY ASSESSOR. THIS CERTIFICATION REQUIRES THAT I REMAIN EMPLOYED WITH THE AGENCY AND/OR SCHOOL THAT I WAS EMPLOYED BY WHEN I BECAME CERTIFIED. ANY CERTIFICATION SHALL NOT BE VALID IF I RETIRE, RESIGN, OR IN ANY WAY SEPARATE FROM MY AGENCY AND/OR SCHOOL. I HAVE READ AND UNDERSTAND THE REQUIREMENTS AND RESTRICTIONS ON ATTENDING THIS TRAINING AND THE INFORMATION I HAVE PROVIDED IS TRUE AND ACCURATE

An incomplete application will delay and/or prohibit enrollment consideration. Participants are responsible for providing their own transportation, meals, lodging, and any other related travel expenses. The NRA is not responsible for any expenses incurred by the applicant or agency and/or school as a result of attending this training. The NRA retains the right to accept or decline applications.

Submit completed application with a legible copy of current Law Enforcement credentials to:

National Rifle Association  
National School Shield - Security Assessor Training  
11250 Waples Mill Road, Fairfax, VA 22030  
or via email to [info@nationalschoolshield.org](mailto:info@nationalschoolshield.org)  
or via fax to 703-267-3892, ATTN: National School Shield

### UNDERSIGNED

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

### NATIONAL RIFLE ASSOCIATION OF AMERICA

John Frazer

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
SIGNATURE