University of Minnesota Police Department
Application for Range Reservation

IMPORTANT: Please review all Current Range Rules and rates before filling out the Range Reservation form.

- Fill in the agency or group name, address, phone number and contact name. Please list only one contact. This should be the primary contact for the agency or group.

Law Enforcement Use

- Check purpose of use
- Note the number of shooters
- Include instructor’s names
- Attach a complete Lesson Plan and Course of Fire listing type and caliber of firearms

Non-Law Enforcement Use

- Complete purpose of use
- Complete an educational goals statement. This must include:
  - Number of shooters
  - Type of firearms
  - Ammunition amount
- List names of certified firearms instructors/safety officers
- Attach firearms instructors and safety officer credentials

Please contact Shannon McGoffin at 612 626-5304 or at mcgof002@umn.edu with questions regarding Range scheduling or paperwork.

The University of Minnesota, in its sole discretion, reserves the right to refuse Range Use to any individual or group, at any time for any reason, including without limitation, any group without adequately trained and certified instructors.
University of Minnesota
University Police Department Firearms Range
Application for Range Reservation
Law Enforcement Agencies

Law Enforcement Agencies wishing to use the range facility must provide the following information and documentation.

1. Documentation needed:
   A lesson plan and course of fire must be attached to this application. The attachments must list the type and caliber of firearms to be used.

2. Agency Information:
   Agency Name: ________________________________
   Agency Address: ________________________________
   ______________________________________
   ______________________________________
   Agency Contact Person: ________________________________
   Contact Phone Number: ________________________________

3. Reservation Information
   Proposed Date(s) of Use: _________________
   Purpose of Use (check one)
     Instruction
     Competition Match
     Other: ________________________________
   Number of Shooter: ______
   Names of Instructors: ________________________________
   ______________________________________
   ______________________________________
   ______________________________________
   ______________________________________