

FIREARMS IDENTIFICATION CARD

Minor Consent Form

To the firearms licensing authority for the Town of Newbury:

This is to certify that the undersigned is the parent or guardian of _____, age_____.

I have read section 129B of chapter 140 of the Massachusetts general laws and confirm that my above named child is not disqualified for any reason from possessing a firearms identification card (ages 15-17).

I hereby grant permission to my above named child to apply for a firearms identification card or pistol permit. I further grant permission to the Chief of Police of the Town of Newbury, or his designee, to issue such card to my above named child.

Signature of Parent or Guardian

Date

Street Address

Town

State

Zip

Witness – Police Officer,
Town of Newbury