MEMORANDUM FOR DIRECTOR OF EMERGENCY SERVICES

SUBJECT: Authorization to Register a Privately Owned Firearm(s) on the Installation

1. I, _________________________________, assigned to _______________________ affirm that:
   - Print - Last Name, First Name, MI
   - UNIT
   a. I am the legal owner of the firearm(s) I am requesting to register.
   b. I have completed safety training for the firearms me or my family members are requesting to register.
   c. I have received a copy of and have read MCOE REG 190-11 and am aware of the policies and procedures outlined in the regulation.
   d. I was informed of the security and storage requirements for Soldiers and civilians living on the installation.
   e. I was informed of the requirement to comply with all federal, state and local regulations pertaining to the ownership, possession, transportation, storage and use of firearms.

   Signed: ________________________________, Date: ____________________

2. I, the undersigned, have verified that ________________________________, assigned to _______________________ is not prohibited from owning a firearm as outlined in MCOE Regulation para 2-2.e and is authorized to register his firearms on the installation.

3. POC for this memorandum is the undersigned at ________________________________.

COMMANDERS NAME
RANK, BRANCH
Commanding