

Gate Survey/Inspection Form

Conducted By: \_\_\_\_\_ Date/Time: \_\_\_\_\_

Member Name: \_\_\_\_\_ Unit: \_\_\_\_\_

Some members live fire weapons they bring to events. This creates a potentially deadly situation when the member inadvertently brings live ammo to an event and it mixes with blanks. In an effort to mitigate this danger AG1944 conducts gate surveys and detailed inspections as necessary.

Does the member own or have they ever owned live ammo for any of the weapons they intend to use during this event?

**IF YES -**

I \_\_\_\_\_ (*event organizer or designee*) personally conducted a detailed inspection of all weapons, ammo and gear. I am satisfied, to the extent practical, that no live ammo is present.

Sign: \_\_\_\_\_ Date: \_\_\_\_\_

I \_\_\_\_\_ (*member*) have no live ammo in my possession and will not possess live ammo during this event at anytime. I understand that the club and my fellow club members entrust me to protect them by keeping all live rounds from mixing with blanks. I further understand that it is club policy that absolutely no live ammo is allowed at any AG1944 event on or off the battlefield.

Sign: \_\_\_\_\_ Date: \_\_\_\_\_

**IF NO -**

I \_\_\_\_\_ (*member*) have no live ammo in my possession and will not possess live ammo during this event at anytime. I understand that the club and my fellow club members entrust me to protect them by keeping all live rounds from mixing with blanks. I further understand that it is club policy that absolutely no live ammo is allowed at any AG1944 event on or off the battlefield.

Sign: \_\_\_\_\_ Date: \_\_\_\_\_