



Village of Owensville  
Police Department

Mike Freeman Chief

115 West Main Street, Owensville, Ohio 45160 Phone (513) 732-1171 Fax (513) 732-5351

## Concealed Carry (Basic) Training Course Student Registration

Please complete and return with (check for payment) to Clerk Charlotte Farmer, Village Of Owensville, at the address listed below (Make check payable to Village of Owensville)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

By signing this application for training, I certify that I am at least 20 years of age and have never been nor am I now; prohibited from possessing a weapon by State or Federal Law; under indictment for a charge that would prohibit me from possessing a weapon; charged or plead guilty to a charge of Domestic Violence or similar charge; adjudicated as drug or alcohol dependent; or a fugitive from justice.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Return this form to:

**Clerk Charlotte Farmer, Village of Owensville  
CCW training application  
115 W. Main St.  
Owensville, OH 45160**

Questions call (513) 732-1171

Lt. Scott A. Humphrey or Charlotte Farmer