



# Mid-Atlantic Tactical Officer's Assoc.



Presents:

## Explosive Breaching Orientation & Awareness Course

www.matoa.net

Thursday July 29<sup>th</sup> 2010

0900 x 1700

**Delaware State Police Firearms Range**  
391 Clark Farm Road  
Smyrna, DE 19977

**Instructor: Sgt. Christopher Ennis, Delaware State Police EOD**

**Course Details:**

- Introduction to Explosives and Initiation Systems
- Hazards
- Charge Configuration
- Target Analysis
- Live Demonstration

**Equipment Needed:**

1. Eye/Ear Protection
2. Long sleeve pant and shirt
3. Hat
4. Ballistic Vest
5. Helmet(not required)
6. Food & Beverages

**Training Information:**

- **Cost:** MATOA Members: Free  
Non-Members = \$40.00
- **Course certificates:** issued at the completion of the training.
- **Questions?** Contact: DSP Sgt. Robert Kraycla - (302) 222-6597

**Detach bottom portion and mail it to the address below.**

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Check One: New Member: \_\_\_\_\_ Active Member: \_\_\_\_\_

Name/Rank: \_\_\_\_\_ Agency/State: \_\_\_\_\_

Agency Address: \_\_\_\_\_ City/State \_\_\_\_\_

Agency Phone Number: \_\_\_\_\_ Cellular Phone Number: \_\_\_\_\_

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

Emergency Contact Person: \_\_\_\_\_ Contact Phone Number: \_\_\_\_\_

**Registration Deadline is: March 20, 2010**

**Send your check, cash, or money order to: MATOA P.O. Box 11822, Wilmington, DE 19850.**

***Attach the Liability Waiver To This Application***

**THE MID-ATLANTIC TACTICAL OFFICERS' ASSOCIATION  
INFORMED CONSENT TO PARTICIPATE AND  
GENERAL RELEASE OF LAIBILITY**

I, the undersigned do hereby state that I wish to participate in the activities sponsored by the Mid-Atlantic Tactical Officers Association, (M.A.T.O.A.).

The M.A.T.O.A. has rules which govern and may restrict the activities in which I can participate. These rules include, but are not limited to the charter, articles of incorporation, by laws and regulations maintained by the M.A.T.O.A. I agree to follow those rules in order to participate in the M.A.T.O.A.'s activities.

I understand that all of the activities are voluntary and that I do not have to participate unless I choose to do so. I understand that these activities are potentially dangerous or harmful to my person or property, and that by participating I voluntarily accept and assume the risk to myself and to my property.

I understand that the M.A.T.O.A. makes no representation or claims as to the condition or safety of the land, structures or surroundings, whether or not owned, leased, operated or maintained by the M.A.T.O.A.

I understand that the M.A.T.O.A. does NOT provide any insurance coverage for me or my property. I acknowledge that I am responsible for my own safety and my own health care needs, and for the protection of my property.

In consideration for allowing me to participate in the M.A.T.O.A.'s activities, classes and events I agree to release from liability and hold harmless the M.A.T.O.A., its officers, instructors, employees and co-host agencies acting within the scope of their duties, for any injury to my person or damage to my property.

This informed consent and release shall be binding upon me, my heirs, assigns, executors, administrators, successors in interest, and/or any person suing on my behalf.

I have read and understood the statements contained within this document. I agree with its terms and have knowingly and voluntarily signed it. I understand that this document is complete unto itself and that any oral promises or representations made to me concerning this document and/or its terms are not binding upon the M.A.T.O.A., its officers, agents, instructors, co-hosting agencies and or/employees.

**I UNDERSTAND THAT THIS IS A LEGAL DOCUMENT. I HAVE READ AND UNDERSTOOD THIS RELEASE AND UNDERSTAND ALL OF ITS TERMS. I EXECUTE THIS DOCUMENT VOLUNTARILY AND WITH FULL KNOWLEDGE OF ITS MEANING AND SIGNIFICANCE.**

Participant's Signature \_\_\_\_\_

Participant's Name (Print) \_\_\_\_\_

Supervisor Signature \_\_\_\_\_

Supervisor Name/Rank (Print) \_\_\_\_\_

Participant's Agency \_\_\_\_\_

Course Name Mid-Atlantic Tactical Officer's Association Explosive Breaching Orientation and Awareness Course

Course Location Delaware State Police Firearms Range, Smyrna, DE

DATE OF COURSE July 29<sup>th</sup>, 2010