The undersigned petition the Whatcom County Council to declare as a no shooting zone in the area detailed on the attached petition form and map. In addition, the undersigned agree that _____ will be the petitioners' contact person in this matter; this person will keep other petitioners informed of relevant meeting dates and times.

By signing this form, petitioners affirm and swear, under penalty of perjury, that they are the owners of property included within the boundaries of the proposed no shooting zone.

NAME (printed)	SIGNATURE	PARCEL NUMBER and STREET ADDRESS of property within boundary of proposed no shooting zone

Petitioner Signature Sheet, Page _____ of _____