

Student Registration

Name: _____ Date of Class _____

Address: _____

City, County & State: _____ Zip: _____

E-Mail Address: _____

I have had basic firearms training: Y _____ N _____

Release and Waiver of Liability

The undersigned acknowledges that the reaction to, possession of, and/or use of firearms is potentially dangerous, and involves risk of serious personal injury, death, psychological trauma, and/or other personal and financial liability. The undersigned agrees to assume all risk and waives any and all claims of liability for personal injury, death, psychological trauma, and/or other personal or financial loss.

Signature _____

Phone _____ Date _____

Basic Pistol: \$89* _____

MN Carry Class: \$89* _____

Florida Carry: \$89* _____

MN/FL Carry: \$125* _____

Women's Only Gun Course: \$200* _____

Emergency 1st Aid: \$89* _____

Countering the Mass Shooter: \$89* _____

Personal Protection at Home: \$89* _____

Personal Protection Away from Home: \$89* _____

Shot Shell Reloading: \$89* _____

Metallic Shell Reloading: \$89* _____

First Shots: P _____ R _____ SG _____

Written Score: _____

Shooting Score: _____

Book: _____

Ammo: _____

Gun Rental: _____

Light Bulb Fee: _____

Food: _____

Transformer Fee: _____

***! Class Fees are NON-REFUNDABLE!**

*This price does not include book. If you already have the book bring it, otherwise you must purchase the book.