

Please print legibly and Return by fax or email or mail along with a copy of your **Photo ID**.

### Registration Form\*

[Please use this form for **PRIVATE TRAINING**]

**(Firearms Courses)**

Address: **12651 Little Tujunga Canyon, Lakeview Terrace 91342** Private Range (will be assigned)

NAME: \_\_\_\_\_ Application Date: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

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

PHONE: \_\_\_\_\_ DAY PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

DRIVERS LICENSE: \_\_\_\_\_ ISSUED: \_\_\_\_\_ EXP DATE: \_\_\_\_\_ DOB: \_\_\_\_\_

#### Please provide a little information about yourself

*Please check that may apply*

I have never shot before     0-3 years (handgun/rifle/shotgun)     5 years+

I will bring my own gun(s) Type(s): \_\_\_\_\_ Caliber(s): \_\_\_\_\_

#### For Media Purposes

*Please check that may apply*

I do not wish to be photographed nor included in any media during this event  
 I wish to be photographed and included in any media during this event

#### Amount Due:

Course Tuition \$ \_\_\_\_\_

Equipment Rental \$ \_\_\_ N/A \_\_\_\_\_

Background Fee \$ \_\_\_ N/A \_\_\_\_\_

**TOTAL:** \$ \_\_\_\_\_

#### Payment Method: **Cash ~~or Check only~~**

We no longer accept Personal Checks.

**CASHIER CHECKS and CASH only**

Mailing Address:

27943 Seco Canyon Rd.

Suite 126,

Santa Clarita CA 91350

Morning class     Afternoon class

#### SIGNATURE & DATE

*Enclosed is my registration fee, and **signed Liability Form**\*. **PHOTO ID is mandatory.***

*\*Liability & Waiver will be signed upon check in onsite.*

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

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

FAX to: **(855) 984-1883**

Email to: **EDUCATION@NICKYDARE.COM**