



Firearm Training School

Safety Course Application

Date of application: ___/___/___

Date of course scheduled: ___/___/___

Check below which course you are registering for:

___ NRA Home Safety Course (LTC-007)

Price: \$75.00

___ ~~NRA Basic Pistol Course (LTC 002)~~

~~Price: \$110.00 (Currently Not Offered)~~

___ ~~NRA Basic Metallic Cartridge Reloading Course~~

~~Price: \$95.00 (Currently Not Offered)~~

___ ~~NRA Basic Shotgun Shell Reloading Course~~

~~Price: \$95.00 (Currently Not Offered)~~

Name: (print) _____

First

Middle

Last

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Email Address: _____

Date of Birth ___/___/___ Age _____ Sex: M / F (circle one)

Have you had any previous firearms experience or training? Yes _____ No _____

If Yes please give a brief explanation of experience or training:

How did you hear about this training course?: _____

Please make checks payable to: FTS Amount Paid: _____

Payment is required prior to the scheduled course in order to reserve your seat. All payments are non-refundable for students who fail to show up for the assigned class unless extenuating circumstances are found and approved by FTS.