

NRA CCW PISTOL COURSE REGISTRATION ~ NRA FIREARMS TRAINING COURSE

Today's Date: _____ Class Date: _____

Name: _____ Age: _____

Address: _____

City: _____ County: _____ State: _____ Zip: _____

e-mail: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____

Shooting Experience:

Military

Target

Competition

Hunting

Trap/Skeet/Clay

New To Handgun Shooting

The reason I am taking this course is (check all that apply)

To apply for a CCW Permit (County in which you will apply: _____)

To learn more about firearms, safety, and shooting

For qualifications shooting I prefer a: Revolver Semi-Auto

I HAVE WILL NEED A.22 caliber target pistol to use for Range Qualification

I HAVE WILL NEED Hearing and Eye Protection for the Range

Remarks:

Please return registration with deposit (\$50.00) to confirm your class reservation.

Please make check payable to: Pam Karousis

Pam Karousis
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Cortland, OH 44410
330-638-6245 work
330-720-1110 cell
pamsnails@aol.com