



104 Village Drive, Suite 1  
Greeneville, TN 37745  
(423) 638-2716  
ShootersDomain.com

### APPLICATION FOR TRAINING

**Some classes may fill well in advance. We cannot confirm your space in a class until we have both your payment and application.**

Application Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Class Date \_\_\_\_/\_\_\_\_/\_\_\_\_

COURSE NAME \_\_\_\_\_

NAME (as you would like it to appear on your diploma) \_\_\_\_\_

NAME YOU PREFER TO BE CALLED \_\_\_\_\_

ADDRESS \_\_\_\_\_

Street

City

State

Zip

PHONE

Home

Office

Cell

DATE OF BIRTH \_\_\_\_/\_\_\_\_/\_\_\_\_ MALE\_\_\_\_ FEMALE\_\_\_\_ (Check One)

DRIVER'S LICENCE # \_\_\_\_\_ E-MAIL ADDRESS \_\_\_\_\_

PLACE OF EMPLOYMENT \_\_\_\_\_ OCCUPATION \_\_\_\_\_

PREVIOUS FIREARMS TRAINING \_\_\_\_\_

TYPE OF FIREARM(S) TO BE USED:

Make

Model

Caliber

Make

Model

Caliber

1. I am enclosing the class fee to reserve my space in this class. I realize that cancellations made less than 15 days prior to class will forfeit their money. If cancellations are made by Shooter's Domain, all fees will be refunded.
2. I agree to abide meticulously by any and all safety procedures required of me. I understand that my instruction may be terminated at any time during the course if I fail to cooperate with safety requirements. I further agree to sign a statement releasing Shooter's Domain and associates from responsibility for any injury I may sustain during the training program.
3. **I HEREBY CERTIFY THAT I AM NOT BREAKING ANY FEDERAL OR STATE LAWS BY PARTICIPATING IN THIS FIREARMS TRAINING COURSE.**

Signature of applicant \_\_\_\_\_ DATE \_\_\_\_/\_\_\_\_/\_\_\_\_