***NORTH ALABAMA FIREARMS TRAINING, LLC***

**TRAINING REGISTRATION FORM**

(Please PRINT Clearly)

CLASS REQUESTED:              

SCHEDULED CLASS DATE

NAME  DATE OF BIRTH       SEX

STREET ADDRESS

CITY       STATE       ZIP

HOME PHONE       OTHER PHONE

EMAIL ADDRESS

I understand that providing my Email Address will add me to the OPT-IN Email list so that I may receive updates from NAFT on firearms laws, legislation, industry news, training information and general information pertaining to firearms, training opportunities and special events.

DESCRIBE PRIOR SHOOTING AND/OR TRAINING EXPERIENCE:

WHAT IS YOUR OBJECTIVE FOR TAKING TRAINING? (Self-Defense, Participate in Shooting Sports etc.)

ARE YOU A MEMBER OF THE NRA (Y/N)?       If Yes, NRA Number:

I understand that my deposit is non-refundable. I agree to all of the terms stated on the attached forms. I understand that if I provided my email address that I have agreed to OPT-IN to the email distribution list.

      4/24/2012

Signature Date

*In order to pre-register, please download, fill out, and then e-mail this form to* *nafirearmstraining@gmail.com* *or you may print it and send it in with your deposit before the pre-registration deadline. In addition, please download, fill out, and sign the Release form (available on the website) and bring both pages with you to class.*