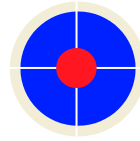


BullsEye



TACTICAL FIREARMS TRAINING

COURSE REGISTRATION FORM

Please complete a registration form for each person attending. Feel free to call (530) 235-0721 or email info@guninstructor.com with any questions.

- This form can be printed and mailed via US Mail if that is more convenient for you than completing the online registration form.
- Many BullsEye courses have prerequisites. Each course description lists the prerequisite needed to take that course. Anyone can start with our basis courses with no previous training. The CCW Initial Permit course is a basic course.
- Pre-registration requires a minimum 50% deposit. Methods of payment include check, money order or online PayPal.

PERSONAL REGISTRATION INFORMATION (Please print clearly.)

First and Last Name _____

Address _____

City _____ State _____ Zip _____

Cell Phone _____ Home Phone _____

Email _____

Please describe your previous firearms training (if none, write "none") _____

BULLSEYE DEPOSIT POLICY: Please understand that BullsEye is a small business that keeps class sizes small for the benefit of the students, and so, no reservation will be held for you and you will not be registered for the class until a deposit has been received.

BULLSEYE REFUND POLICY: If your class is cancelled, your deposit is fully refundable. If you cancel at least 14 days prior to the class date, half of your course fee is refundable, OR the full course fee can be applied to reserve another available class space. If you cancel with less than 14 days remaining prior to the class date, your deposit is totally NON-REFUNDABLE.

DEPOSIT INFORMATION

Enclosed is \$_____ to: (check one) Place a 50% deposit Pay in full

Course Title: _____ Course Date: _____

I am paying with (check one): Check Money Order PayPal

I understand that I cannot participate in any BullsEye course if federal or California state law prohibits me from possessing firearms. By signing below, I am confirming that I am not prohibited by federal or California state law from possessing firearms.

Signature _____ Date _____

Our mailing address is:
BullsEye Tactical Firearms Training, P.O. Box 147, Castella, CA 96017