



Firearms Safety Training LLC

REGISTRATION FORM

Course Title: Home Defense Shotgun – November 24, 2006

Course Location: South River Gun Club, Covington GA www.southrivergunclub.com

The class fee is \$125.00. To reserve a space in the class, please return this form with a check for the course fee made payable to Firearms Safety Training LLC to the address below. A range fee of \$20 will be collected on the day of class.

Upon receipt of your check, a confirmation of receipt and further information on the class will be emailed to you.

All refund requests must be made in writing and postmarked at least 30 days prior to the day of the course. Refund requests within 30 days will only be honored if the space can be filled from a wait list.

Name: _____

Address/Apt. #: _____

City State, ZIP: _____

E-mail address: _____

Mail To:

FST
PO BOX 190458
ATLANTA GA 31119