

Tactical Firearms Academy Course Sign-up

Please fill in this form, so that we can process your application. Failure to fill in this form correctly, or with false information, may cause unforeseen booking problems

About Yourself

This first section deals with your personal information. This information will not be available to any third party.

Name

First

Last

Please use your real name, and not an alias, or a nickname. This is VERY important.

Email

This email address is where we will send any confirmation emails to.

Address

Street Address

Address Line 2

City

State / Province / Region

Postal / Zip Code

Country

Please complete your full address. This must be an address where you live as well as collect mail.

Date Of Birth

Telephone Number

Nationality

Health Problems

About the Course

This section, deals with information about your selected course

I Want to Join this Course (tick one only)

- 2 Day Basic Pistol
- 2 Day Intermediate Pistol
- 3 Day Advanced Pistol and Carbine

Date Of Course

Please check our site for availability and booking dates

Previous Firearms Experience

- Yes No

Professional Background

- Military PSD Police Civilian Sports

About your Payment

This section is about your payment. Please don't put any credit card details in this box. If you need to pay by card, then book on-line first

Payment Method

- Credit Card Cheque Bank Transfer

Payment notes

In this box, you need to put any On-line Order References, Cheque Numbers, References or dates regarding this payment.

Emergency Contact

We need an emergency contact number.

Emergency Contact Name

First Last

Emergency Contact Number