



Application for Training

Instructions: Please provide all information requested below. Print, complete and then submit this application along with your payment to the address or e-mail shown below. You may pay for all fees by credit card or through a PayPal account. ***SUBMIT ONE APPLICATION FOR EACH STUDENT AND EACH CLASS YOU PLAN ON ATTENDING.***

Course Name: _____ Course Date(s): _____

Full Name: _____ Name for Badge: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Primary Phone: _____ Secondary Phone: _____

E-Mail Address: _____

Date of Birth: _____ Sex: ___ M ___ F Handed Shooter: ___ L ___ R

Employer: _____ Occupation: _____

Primary Firearm: Make _____ Model _____ Caliber _____

Transition Firearm: Make _____ Model _____ Caliber _____

Summarize previous firearms experience: _____

Briefly explain why you want to attend this class: _____



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Latent Force credential policy requires, for all basic courses, students are to submit by mail or e-mail the following:

- Copy of U.S driver's license

Latent Force credential policy requires, for all other courses, students are to submit by mail or e-mail the following:

- Copy of U.S driver's license
- Copy of current active duty, reserve, retired MIL/LEO ID card (if applicable)
- If civilian, a copy of **current** Concealed Weapon permit **OR** Federal Firearms License **OR** copy of Criminal History Report from a Law Enforcement Agency
- Credentials must be updated and renewed every 2 years

By submitting this application, I understand and agree:

- That the credentials enclosed meet the requirements, as outlined by Latent Force LLC, and that I must positively identify myself as the same person certified in the credentials for enrollment.
- That Latent Force's operation depends on the careful control of deadly weapons by each participant; therefore I understand that my instruction may be terminated, without a refund, at any time during the course if my conduct is not deemed satisfactory at the **sole discretion** of the staff.
- That I will abide precisely by any and all safety procedures required by Latent Force and/or the facilities being used, and that I agree to sign a statement releasing Latent Force LLC from any injury I may sustain during the training course.
- That I will be at least 18 years of age at the time of class **OR** will be accompanied by my parent or legal guardian.
- That I am a United States Citizen.
- That I am not legally prohibited from possessing and firearm under State or Federal Law, and that the above statements are true and correct and if found to be false will result in immediate dismissal from the course without a refund.

PAYMENT: Deposit for the fees is enclosed: ___ Half Tuition ___ Full Tuition** ___ Tuition Financing

(* *some classes may require full tuition be paid at time of registration, please refer to the course description*)

Tuition Financing – I authorize Latent Force LLC to bill my credit card in equally monthly installments from the time the application is received and until 2 weeks prior to the start of the course.

Credit Card – I authorize Latent Force LLC to bill my: ___ Visa ___ MasterCard ___ Discover ___ Amex

Credit Card #: _____ Expiration: _____ Security Code: _____ Zip Code: _____

Photo/Video Release: By registering for any Latent Force class, I agree to allow publication of photos or video taken of myself or my child/children at any class, event or facility.

Signature: _____ Date: _____