

Common Sense Self Defense

Registration Form



Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Are you over 18 years of age?: _____

Class You Are Registering For:

- Introduction to Handguns Workshop: \$15
- Concealed Carry & Home Defense: \$85
- NRA Basics of Pistol Shooting Phase 2: \$100
- Private Lesson: \$60 per hour (1-hour minimum)

It's okay to contact me to keep me updated of upcoming training events. Yes___ No___

**Prepayment in full is required. All checks will be held until the day of the class. Registrations must be received at least one week before class dates. Late registration may possibly be turned away, forwarded to a future class, or charged an additional \$5 late fee.*

Make checks payable to Allen Marker & mail to: 1993 W. Bakersville Edie Rd., Somerset, PA 15501.

Liability Release:

I hereby agree to hold harmless Common Sense Self Defense, its owners, trainers, employees, other students and representatives, and all training locations for any and all liability and claims for loss, damage, injury, or even death to any person, animal, or object that may arise from my participation in training classes. I realize that participation in self defense training activity may have its risks, and I understand and accept these risks fully.

I have read the above and understand its meaning.

Signature _____ Date _____

(parent or guardian for students under 18)