

I have read the description of the NRA Instructor Training Program on the previous pages, understand its goals, and am interested in attending a course to prepare me to become an NRA Certified Instructor.

Signature _____

Name _____

Street _____

City, State, Zip _____

Email address _____ @ _____

Daytime Phone _____ Evening Phone _____

Today's Date _____ Date of Birth _____

Occupation _____

Highest level of education completed _____

NRA Member? _____ Status (Annual, Life, etc.) _____

Do you currently hold ratings as an NRA Basic Firearm Training Instructor or NRA Shooting Coach? _____ If yes, which ratings do you hold? _____

Which instructor ratings are you interested in obtaining? _____

Why do you wish to become an NRA Certified Instructor? _____

Where do you plan to conduct the classroom and range portions of your NRA Basic Firearm Training Courses? _____
