



Up in Smoke Firearms Training (USFT), LLC Training Agreement Form



I/We have thoroughly reviewed the costs and details of the proposed training offered by Up in Smoke Firearms Training (USFT), LLC and I/We have jointly agreed to select Option(s) _____ for the training requested, and I/We hereby agree to attend all of the training offered and selected.

I/We agree, understand, and immediately forfeit half of the cost to attend the course where half of the cost to register/attend is automatically non-refundable. I/We agree and understand that if I/We choose to not finish the entire training that we forfeit any reimbursement(s) or payment(s) for failing to thoroughly complete any and all training. I/We further agree and understand that in the event that I/We cannot meet or exceed the expectations of the training being offered that I/We forfeit any reimbursement(s) or payment(s). I/We also agree and understand that in the event that I/We cannot arrive at the agreed time, date, and location for training that I/We must give Up in Smoke Firearms Training (USFT), LLC advanced notice of at least five (5) days and failing to do so I/We forfeit any chances of reimbursement(s) or payment(s) by not meeting or exceeding this training agreement form.

I/We further understand that in the event that I/We fail to return the required forms, such as this one, in a timely manner set by USFT, LLC or Dan Palmer and we have already paid for or purchased attendance or a registration; that I/We automatically forfeit any reimbursement (deposit or full payment) from USFT, LLC or Dan Palmer for not meeting or exceeding the expectations as a client/customer.

I/We clearly understand and agree to pay for any and all training selected prior to the training or classes actually starting/beginning by doing so in cash, certified check, and/or debit or credit card. I/We furthermore agree and understand that any lack of funding in our personal accounts in my/our banking institution(s) where additional costs are incurred by Up in Smoke Firearms Training (USFT), LLC



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while attempting to receive funding for training will result in an additional personal charge of each person attending the training to be \$55.00.

I/We clearly understand and agree that we may be able to establish payments for such training selected, but I/We will automatically pay Up in Smoke Firearms Training (USFT), LLC for half of the cost up-front, per-person, and clearly understand that by not paying for total services rendered by Up in Smoke Firearms Training (USFT), LLC, I/We assume and agree to pay any and all legal fees associated with Up in Smoke Firearms Training (USFT), LLC having to recover agreed payment through the City, County, State, and/or Federal judicial courts during a civil lawsuit.

I/We further agree and understand that the total cost(s) of training selected will be \$_____.

(Minors Legal Printed Name) (Date) (Signature)

(Email address) (Phone #)

(Self/Parent/Guardian Legal Printed Name) (Date) (Signature)

(Email address) (Phone #)

(Witnessed by) Legal Printed Name (Date) (Signature)

(USFT Representative Name) (Date) (Signature)