

Nebraska Professional Concealed Carry Weapon Training

Cost: \$120.00

Please Fill out all information, make check's payable to the instructor and send this form, payment or drop it off to

Will Johnson
P.O. Box 24
304 Preston St
Litchfield, NE 68852

Once form is received, we will e-mail you or call you to confirm class date

Student Registration Form

Full Name: _____

Gender: _____ Age: _____ Date of Birth: _____

Street Address: _____

City/State : _____ Zip: _____

Phone Number: _____

Email: _____

Nebraska Drivers License Number: _____

Preferred Class Dates

1st Choice: _____

2nd Choice: _____

Refund Policy: NO REFUNDS If you are unable to attend due to an emergency and you let us know as soon as possible, you MAY at OUR DISCRETION be allowed one "rain check" date. A no call / no show will not get a rain check.