

**TARGET MASTER SHOOTING ACADEMY, LLC  
MARKSMANSHIP SKILLS CLINIC REGISTRATION FORM**

(Please PRINT Clearly)

CLINIC DATE SCHEDULING FOR \_\_\_\_\_

NAME \_\_\_\_\_ AGE \_\_\_\_\_ SEX \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ OTHER PHONE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

**I understand that providing my Email Address will add me to the OPT-IN Email list so that I may receive class registration confirmations, updates from TMSA on firearms laws, legislation, industry news, training information and general information pertaining to firearms, training opportunities and special events. You may choose to OPT-OUT at any time you wish. It is NOT our desire or intention to "spam" anyone. We DO NOT share our list with anyone under any circumstances.**

DESCRIBE PRIOR SHOOTING AND/OR TRAINING EXPERIENCE:

\_\_\_\_\_  
\_\_\_\_\_

EXPLAIN OBJECTIVE FOR PARTICIPATING IN THIS CLINIC? (Improve Marksmanship Skills, Participate in Shooting Sports...)

I, the undersigned, have read and fully understand the class instruction sheet. I agree to all safety procedures required by TMSA. I further agree to sign a statement releasing TMSA and all of its agents of any and all responsibility for any injury that I may sustain during the course. **I understand that class fees are non-refundable.** I understand there is a \$50.00 service charge on any bank returned check. I certify that the statements I have made above are true and correct and I agree to all terms and conditions of this class as stated on this registration form and on the class instruction sheet.

\_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

**IF PAYING BY CREDIT CARD: Circle One:**      VISA      MASTERCARD      DISCOVER

**NAME AS IT APPEARS ON CREDIT CARD** \_\_\_\_\_

**CREDIT CARD #** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ **AMOUNT \$** \_\_\_\_\_ **EXP DATE** \_\_\_\_\_

**My signature below authorizes TMSA to charge to my credit/debit card for my class fee and agree to pay those charge.**

**SIGNATURE** \_\_\_\_\_

**BILLING ADDRESS FOR THIS CARD IF DIFFERENT FROM ABOVE:**

**Street** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

*Please check this box if you wish to join the NRA. Include additional payment of \$25.00 for this membership.*

**DO NOT WRITE BELOW THIS LINE**

**FOR TMSA USE ONLY:**

Date \_\_\_\_\_ Check/MO # \_\_\_\_\_ NRA Pymt \$ \_\_\_\_\_ Class Amount \$ \_\_\_\_\_

Class Date \_\_\_\_\_ QB Date \_\_\_\_\_ QB Total \$ \_\_\_\_\_

Pymt Also For \_\_\_\_\_

## INSTRUCTIONS FOR ATTENDING THE MARKSMANSHIP SKILLS CLINIC

1. Fill out and mail the registration form and signed instruction sheet with your credit card information, check or money order in the amount of \$90.00. Make payable to Target Master Shooting Academy, LLC. Reservation in the clinic is confirmed only after receipt of registration form and payment of fee. Mail to:

**Target Master Shooting Academy, LLC  
P. O. Box 117  
Bonner Springs, KS 66012-0117**

2. You may bring any handgun you wish to train with. Multiple guns are allowed. You may rent a gun from The Bullet Hole. No caliber over .45acp is allowed and no magnum ammunition.
3. Eye and ear protection is required. These items may be rented from The Bullet Hole.
4. Bring at least 150 rounds of target ammunition. **NO RELOADS ARE ALLOWED.** Ammunition must be in factory containers. Ammunition may be purchased from The Bullet Hole.
5. If you are a member of The Bullet Hole, bring your membership card with you. If you are not a member you will need to purchase a one year membership for \$20.00 (not including tax) the morning of your class.
6. Targets will be provided by TMSA.
7. The clinic will run from 3:00pm to 6:00pm. Plan to arrive at 2:45pm to allow check in time. Check in at the front counter of The Bullet Hole prior to 2:45pm and then proceed to the classroom downstairs.
8. This clinic is designed to improve the use of shooting fundamentals and increase your accuracy. All safety rules must be strictly adhered to.
9. No holsters are allowed. This is not a tactical technique class but rather a precision and fundamentals class.
10. Firearms must be unloaded and in a container that fully encases the firearm. No loaded firearms are allowed in the classroom.
11. I understand that providing my Email Address will add me to the OPT-IN Email list so that I may receive class registration confirmations, updates on firearms laws, legislation, industry news, training information and general information pertaining to firearms, training opportunities and special events. You may choose to OPT-OUT at any time you wish. It is NOT our desire or intention to "spam" anyone. We DO NOT share our list with anyone for any reason whatsoever.
12. **Cancellation Policy: Class fees are not refundable under any circumstances.** If you do not show up, and you have not called to be excused with a legitimate reason that is classified by us as an emergency, your class fee is forfeited. If you have been excused, you may reschedule for another date. If you have a legitimate emergency, such as a serious illness or death in the family that prevents you from attending, you must phone us prior to the start of class or your class fee will be forfeited. Cancellations or reschedules may **NOT** be handled via email. You must call us on the phone (913-667-3044) and speak to us. If you are calling the morning of the class, and you are unable to reach us at the TMSA office, leave a message and call The Bullet Hole at 913-432 0050. If you wish to reschedule for another date for any reason that is not classified as an emergency, you must contact us by phone a minimum of 7 days in advance or your class fee will be forfeited.

In the event that TMSA should have to cancel any class due to some rare occurrence such as severe inclement winter weather, you will be offered a reschedule for another date. If none of the dates available will work with your schedule, you will be issued a refund. Classes are never cancelled providing The Bullet Hole is able to open the doors. If we are able to proceed with class, you will not be excused for reasons of inclement weather.

**I, the undersigned, have read, fully understand, and agree, to these instructions. By affixing my signature hereto, and submitting this form to reserve a seat in class, I understand my class fee is not refundable and I understand the cancellation policy.**

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Signature

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Date

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Print Name