

RANGER FIREARM INSTRUCTION, LLC
Class Registration Form

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

E-mail: _____

Phone Number: (____) _____

Agency/Organization: _____

MCOLES Number: _____ CPL: Yes No

Course Title(s): _____

Course Date(s): _____

Course Cost(s): _____ Total: _____

Method of Payment: (check one)

Paypal Check Cash Money Order

Leading The Way In Training Through Excellence

Complete this form and
Submit online or mail to:

Ranger Firearm Instruction
P.O. Box 233
Sparta, MI 49345