



2440 HUNTER ROAD
 PO BOX 394
 BRIGHTON, MI 48116
 www.livingstongunclub.org

COMMERCIAL TRAINING APPLICATION

INSTRUCTOR

LEAD INSTRUCTOR		COMPANY	
ADDRESS			
CITY, STATE, ZIP			
PHONE		E-MAIL	
SPONSOR	SIGNATURE		DATE

COURSE

DESCRIPTION	
NUMBER OF STUDENTS	TUITION AND OTHER FEES

SCHEDULE

DAY1	START	END	CLASS ROOM	HANDGUN BAY	RIFLE BAY
DAY2	START	END	CLASS ROOM	HANDGUN BAY	RIFLE BAY

AUTHORIZATION

NAME / TITLE OF APPROVING OFFICER	SIGNATURE	DATE
-----------------------------------	-----------	------