

# STRETZ TACTICAL INC.

ACCURACY - SPEED - MINDSET

## Student Application

(Please fill out all sections completely or your application may be rejected and you will not be allowed to attend training)

Mail completed applications & payment to: Stretz Tactical Inc., P.O. Box 101, Yorktown Heights, NY 10598 or email your application to [Stretztactical@gmail.com](mailto:Stretztactical@gmail.com) and indicate on the application that you either paid via our website or payment is being mailed separately.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Email (Required for confirmation): \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: Cell: \_\_\_\_\_ Home: \_\_\_\_\_ Work: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver's License No.: \_\_\_\_\_

Are you a U.S. Citizen? YES \_\_\_\_\_ NO \_\_\_\_\_ If not, what is your country of citizenship? \_\_\_\_\_

Passport Number (If not a U.S. citizen): \_\_\_\_\_ Exp date: \_\_\_\_\_

Place of Employment: \_\_\_\_\_ Occupation: \_\_\_\_\_  
(If you are self-employed please indicate what type of business you have)

Course(s) Requested & Date(s): \_\_\_\_\_

Firearm(s) to be used and caliber: \_\_\_\_\_

Prior Firearms Training Name and Location: \_\_\_\_\_

\_\_\_\_\_

Name of Instructor(s): \_\_\_\_\_

Classes completed and Dates: \_\_\_\_\_

\_\_\_\_\_

Emergency contact person name: \_\_\_\_\_

Emergency contact person phone number: \_\_\_\_\_

How did you hear about Stretz Tactical? \_\_\_\_\_

**If you are registering for a live fire pistol course (not the hand gun safety course), please provide the following information:**

Are you a sworn law enforcement officer? \_\_\_\_\_ If yes, What is your agency name & address? \_\_\_\_\_

What is your rank & shield number? \_\_\_\_\_

If not law enforcement, state your pistol permit was issued in \_\_\_\_\_ Permit number \_\_\_\_\_ Expiration date \_\_\_\_\_

**By signing this application, I have read, understand and agree to the following:**

Stretz Tactical, Inc. reserves the right to refuse training to anyone. By signing this agreement you attest under penalty of perjury that the following are true:  
(please make sure to initial where it's indicated)

- I have no felony convictions. \_\_\_\_\_ (initials)
- I have no domestic violence misdemeanor convictions. \_\_\_\_\_ (initials)
- I have never been adjudicated as mentally ill or have ever been committed to any mental institution. \_\_\_\_\_ (initials)
- I do not have any restraining orders placed against me. \_\_\_\_\_ (initials)

Instruction given by Stretz Tactical is for the sole purpose of instruction for the students attending the class ONLY. All material presented is the sole property of Stretz Tactical, INC. No videotaping or audiotaping any portion of class is allowed. We assume no responsibility or liability for any student attending a class who uses any information obtained in the courses to instruct others.

Safety is strictly enforced on our range. Any student not following safety rules or whom we deem unsafe will be asked to leave the range. There will be no refund provided.

Everyone attending a class is expected to sign a waiver releasing Stretz Tactical, Inc. and agents of Stretz Tactical, INC. from liability. This waiver will be provided on the day of training.

All students attending a class must be at least 18 years of age unless a parent is accompanying the minor. Courses are planned and instructors are assigned to teach courses based on sign ups. **Payment is due at time of registration & refunds will ONLY be granted to cancellations made 2 weeks prior to the start of class (or earlier), unless the students can provide Stretz Tactical, Inc. with written documentation of an emergency prohibiting the student from attending class.**

**I agree to the above.**

**Name (Please Print Clearly):** \_\_\_\_\_

**Please sign: X** \_\_\_\_\_ **Date:** \_\_\_\_\_