

Final Option Inc.
2003
Mobile Training Course Request Application
Please Print

Course Requested: _____

Circle length of class requested: 1 day / 2 day / 3 day / 4 day / 5 day

Course Dates Requested (If available please list top 3 dates)

1st Choice: _____

2nd Choice: _____

3rd Choice: _____

Contact Person: _____

Title/Rank: _____

Address: _____ City: _____

State: _____ Zip: _____

Name of Agency/Club: _____

Telephone- Home: () _____ Work: () _____

Fax: () _____ E Mail: () _____

Best time/location to contact you by phone: _____

Does the range facility meet the course requirements. Please refer to our web-site under "Hosting a class"? Yes / No / Not sure please contact us.

Location of range facility: _____

Please write a brief description of the range facility to be used.

Is there power available at range facility? Yes / No

Is there a classroom available at or close to the range Yes / No

Can a vehicle and trailer have direct access to shooting bays? Yes / No

Can range equipment and target systems be safely left on location for the duration of the class? Yes / No Explain

Please Check One:

_____ We request to have a “Closed Class” and will be responsible for filling the course minimum of 10 students unless prior arrangements have been made with Final Option inc.

_____ We cannot meet the minimum student requirements and would like to host the course and open the class to qualified, outside personnel and guests.

Please mail or fax this completed application. Upon receipt of this application Final Option will check to see if the dates you request are available. We will then promptly contact you. If you have any questions please contact us by phone or Email.

Final Option, Inc.
P.O. Box 27
Cedar, MN 55011

Phone/Fax
763-413-2395
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