

Firearms Experience & Client Profile Questionnaire

Everyone who wishes to receive Firearms Training Instructions with Scorpion Defense Training Group LLC. MUST completely fill out this form. All information supplied will be kept strictly confidential, not distributed or made available to others for any purpose, and is for the

Sole use by Scorpion Defense Training Group LLC to property identify the user, and to document their previous firearms experience. This is being done to best insure The safety of all instructors and shooters. (* Must be filled out below)

*Name					
*Address City Sta	ate Zip Code				
Age *Phone	ge *Phone (home/mobile)		Phone (work)		
Occupation Title	Employer				
*Driver's License # *Firearms l		ID Card # *D.O.B.		*Email	
I would rate my p	orevious experience		_		
Handgun	Beginner	Novice In	termediate	Expert	
Rifle					
Shotgun					

Have you ever been adjudicated as mentally defective, been committed to a mental institution, or have a history of mental illness? Yes \square No \square
Are you a user of, or addicted to, marijuana, or any depressant, stimulant or narcotic drug, or any other controlled substance? Yes \square No \square
In consideration for being given Firearms Training Instructions by Scorpion Defense Training Group LLC., the facilities we utilize and/or equipment, the undersigned, for himself or herself and his or her heirs, executors and administrators, releases, waives, discharges and covenants not to sue Scorpion Defense Training Group LLC. each of its members, officers, managers, employees and agents for any and all liability, claims, demands, actions and causes of action whatsoever for personal injury or property damage arising out of the use of the equipment and/or facilities of Scorpion Defense Training Group LLC. Agrees to hold Scorpion Defense Training Group LLC from and against any responsibility for any and all claims, demands, actions and causes of action for personal injury or property damage, loss or injury, including death, that may be sustained by the undersigned, whether caused by the negligence of the Releases or otherwise, arising out of all such use. I acknowledge that as a condition to Scorpion Defense Training Group LLC providing firearms Instructions allowing me to utilize their weapons and any facility and/or equipment, I will also be required to sign and deliver to any other forms requested. The undersigned agrees to be held financially responsible for any willful act of destruction to any part of the Scorpion Defense Training Group equipment, beyond normal wear and tear.
Signature
Date / /