



## Clarion County Sheriff's Office Basic Pistol Class Sign-up Form

Name: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Date Of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Do You Have a Concealed Carry Permit: Y / N

Concealed Carry Permit Number: \_\_\_\_\_

Describe your experience level with a handgun: \_\_\_\_\_

\_\_\_\_\_

Please provide the following info on the pistol will you bring to class:

Manufacturer:(e.g. Ruger, Smith&Wesson, etc.) \_\_\_\_\_

Model:(e.g. LCP, Model 38, etc.) \_\_\_\_\_

Caliber:(e.g. .380, 9mm, .357, etc.) \_\_\_\_\_