



SMITH & WESSON ACADEMY

FIELD SCHOOL REGISTRATION



HOSTING AGENCY: Westchester County Department of Public Safety
 TRAINING SITE: 2 Dana Road, Valhalla, NY 10532

Student Prerequisite: Must be Active LE, Military or Armed Security Service and acquiring these skills and certification to work on the below department/unit/company firearms.

Check appropriate boxes for each class:

CLASS/DATES	TUITION		TOOL KIT to Purchase – Sales Tax Exempt*		TOOL KIT to Purchase – With Sales Tax		TOOL KIT Furnished by Student
M&P Rifle Armorer – October 17-18, 2017	<input type="checkbox"/>	\$325.00	<input type="checkbox"/>	\$300.00	<input type="checkbox"/>	\$300.00 + \$21.75 = \$321.75	<input type="checkbox"/>
M&P Pistol Armorer – October 19, 2017	<input type="checkbox"/>	\$180.00	<input type="checkbox"/>	\$79.00	<input type="checkbox"/>	\$79.00 + 5.73 = \$84.73	<input type="checkbox"/>

*Must attach Sales Tax Exempt Certificate, or sales tax will be charged.

** Students must attend M&P Pistol Armorer course the day before in order to register for the 4 hour Shield class.

Name: _____ Rank: _____

Department: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell Phone: _____

Email: _____

Authorizing Signature _____ Title _____
(Signature of supervisor or commander approving attendance and agreeing to the terms of this registration form.)

Method of Payment: Check Enclosed: _____ P.O.#: _____

MasterCard VISA Name on Card: _____

Card #: _____ Exp. Date: ____/____/____

Signature: _____

S&W Tax ID# 13-3386737

Please allow 1–2 weeks for confirmation and registration processing.

Refund Policy/Course Change: Tuition is refundable prior to the start of the class less a \$25.00 refund fee. A \$25.00 administration fee will be charged for course changes by students.

RETURN APPLICATION AND PAYMENT BY Sept. 18, 2017

Smith & Wesson Academy
 ATTN: New Registration
 299 Page Blvd., Springfield, MA 01104
 Telephone: (413) 846-6461 ~ Fax: (413) 736-0776
academyregistration@smith-wesson.com

US PERSON CONFIRMATION:
 The registrant named on this form is a **US PERSON** (US Citizen or Resident Alien)

YES NO

Office use only:

Cust. # _____

Order # _____

Invoice # _____