



Personal Protection Concepts Ltd. Class Registration Form

DIRECTIONS: Please print legibly. Complete the form and mail it and the deposit required to:
Personal Protection Concepts Ltd.
PO Box 340485
Beavercreek, OH 45434

Name _____
Last First Middle Initial

Address _____
Street City State Zip

Date Of Birth _____
Month Day Year

Telephone (_____) _____

First Choice - Class # _____ Shooting Time _____

Second Choice - Class # _____ Shooting Time _____

Amount Enclosed: \$ _____

Email Address: _____

Are you a Greene County Fish & Game Assn. Member? Yes No

If so, Member Number _____

Additional Questions/Comments _____

Fees:
\$100 - Full Registration for Ohio Concealed Carry Training Course
\$75 - Full Registration - Ohio Concealed Carry Training Course for Greene County Fish & Game Members ONLY (you will be required to bring the membership card to the first class)
\$75 - Deposit for Ohio Concealed Carry Training Course. This will reserve your seat. (Remainder of balance due, may be paid in person before the start of class.)
\$45 - Full Registration for Women's Self Protection Course
Accepted methods of payment are: Money order, cash, or checks. Make all checks payable to Personal Protection Concepts Ltd.