

Specialized Emergency Response Training DBA Battlefield Shooting Range



Send the completed form to:
 Battlefield Shooting Range
 1001 Industrial Place RD
 Stonewall, MS 39363

Areas in yellow must be filled out in order to process your application



Name:	LAST NAME	FIRST NAME	MIDDLE NAME	DATE OF BIRTH mm/dd/yy	DATE OF APPLICATION
Address	STREET ADDRESS		CITY	STATE	ZIP CODE
Phone	HOME PHONE	CELL PHONE	EMERGENCY CONTACT NAME		EMERGENCY CONTACT PHONE
Email	Please print legibly as this is our primary means of contact		Law Enforcement	Military	10% discount
	@		<input type="radio"/> yes	<input type="radio"/> yes	
	@		<input type="radio"/> no	<input type="radio"/> no	
	Email again just to be sure we get it right!		<i>(if yes, photo copy of ID card needs to be attached to application to receive discount)</i>		
	@		We use email for primary contact about membership information, such as special events, range closures, or range access information. It is very important to ensure your email is legible in order for us to keep you updated on the range.		
	Spouse Name: Fill out only if family membership				
If you are interested in any special events or training, please let us know below:					
			OFFICE USE ONLY: MEMBERSHIP DATE:		
			MEMBER NUMBER:		AMOUNT PAID/PMT METHOD