

# NROI LEVEL I SEMINAR APPLICATION

*PLEASE PRINT CLEARLY--Certification information is taken directly from this application.*

Name: \_\_\_\_\_ USPSA No: \_\_\_\_\_ Exp. Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Date Of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

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

City, State, Zip: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Club Affiliation: \_\_\_\_\_ Location: \_\_\_\_\_

IPSC Shooting Experience: \_\_\_\_\_

Why do you want to attend this seminar? \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***Please Note:***

***Seminar fee must be included with this application and USPSA Membership is mandatory for seminar attendance.***

## NROI USE ONLY

Seminar Location: \_\_\_\_\_ Date: \_\_\_\_\_

Instructor: \_\_\_\_\_

Final Exam Score: \_\_\_\_\_

Recommendation to Certify: ( ) Yes ( ) No \_\_\_\_\_/\_\_\_\_/\_\_\_\_

Instructor's Signature and Date

Comments: \_\_\_\_\_

\_\_\_\_\_