



**IWI US, Inc.**

# ARMORER'S SCHOOL REGISTRATION FORM

\*Please complete ALL information for participant and print legibly\*

**REGISTRATION:**

Tuition must be paid in full in order to guarantee a seat in the class.  
Non-refundable \*In the event of a cancellation will be applied towards a future class.

**\*\*Certification requires student to pass 2 practical & 1 written exam.**

Course Dates Requested:

Full Name:

Email:

**PROFESSIONAL INFORMATION:**

Dept./Agency Name:

Work Phone:

Mailing Address:

Title/Rank:

City/State/Zip Code:

**PAYMENT: \$250.00 ALL PAYMENTS MUST BE RECEIVED 45 DAYS PRIOR TO CLASS.**

Name on Card:

Phone #:

Card Number:

Billing Address:

Card Expiration:

City/State/Zip Code:

CCV:

Authorization Signature:

**ALL CORRESPONDENCE AND PURCHASE ORDERS SHOULD BE SENT TO:**

**IWI US, Inc.**

**ATTN: Armorer School Admin**

**PO Box 126707 Harrisburg, PA 17112**

**tel: [717-695-2081](tel:717-695-2081) fax:717-412-0873 email: [MarcyG@iwi.us](mailto:MarcyG@iwi.us)**

**IWI US, Inc. Tax ID# 45-4817095**