

**DEFENSIVE EDGE TRAINING AND CONSULTING, INC.**

**TRAINING APPLICATION AND CREDENTIAL REQUIREMENTS**

**INSTRUCTIONS:**

Please read this application thoroughly and provide ALL required information. If you phone or email us to reserve a date to attend class, we cannot guarantee your place in the class until we receive these items. Your reservation will be confirmed **after** we have received the following items:

1. The completed application.
2. **Full payment is required before class.** All fees are non-refundable, but may be applied to any other course within 60 days of original course date, if the class is cancelled or you are unable to attend the scheduled class.
3. Copy of current drivers license.
4. Credential documentation.

**DO NOT SEND ONE PART WITHOUT THE OTHERS:**

The credential is only required of first-time students. We need one application and proper credentials (if applicable) for each person applying for training. A separate application for each class an individual wishes to attend is administratively necessary. Deposits may be combined for students attending together.

**Training Application**

Title of Class and Date: \_\_\_\_\_

Registration Fee: \$\_\_\_\_\_

Check Enclosed \_\_\_\_\_ Electronic Payment \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_ (This is the address your confirmation is sent to)

Profession: \_\_\_\_\_

Right or Left Handed: \_\_\_\_\_

Firearm Make: \_\_\_\_\_

Model: \_\_\_\_\_ Caliber: \_\_\_\_\_

Medical  
Conditions/Allergies \_\_\_\_\_

T-Shirt size: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

### **Credential Policy:**

In order to maintain our high ethical standards, we require applicants to provide documentation of responsibility before they are accepted as students. We regret any inconvenience, but we are confident that our students do not wish to share their training experience with persons of questionable character.

Each student candidate must supply:

- Attached Application
- Payment of the class registration fee. Fees are non-refundable, but may be applied to any other course within 60 days of original registered course.
- Copy of their current driver's license
- Credential documentation from any **ONE** of the following categories:

#### **Credential Category I**

Evidence of no criminal history from a law enforcement agency. Your local police department is usually the source for obtaining this type of documentation.

#### **Credential Category II**

Possess a valid Concealed Carry of a Weapon Permit from your state of residence. Or possess a valid permit to purchase a weapon from your state of residence.

#### **Credential Category III**

Evidence of current full time active service with a public law enforcement agency.

#### **Credential Category IV**

Evidence of current full time active service in the United States Armed Forces.

#### **Credential Category V**

Evidence of current reserve military status accompanied by a written recommendation by the applicant's commanding officer.

**Applicants under 18 years of age** must be accompanied by a parent or legal guardian, and must provide a letter from their local Police Department stating that they have no criminal history.

All students will be required to show a valid State Picture Identification Card or Drivers License at day of training.

Send completed application, payment for class or deposit to: Defensive Edge P.O. Box 682 Anoka, MN 55303. The fax number is 763-712-1434.