



APPLICATION FORM
Range Program Questionnaire

Email to Andrew Gore at Andrew.Gore@gd-ots.com

1- Name of training company:

2- Address of training company:

3- Point of contact

Name:

Telephone:

E-mail address:

Website:

4- How long has the company been in business?

5- Does the company have a Liability Insurance Policy of \$2,000,000 or more?

yes

no

6- Does your company have a mission statement?

(if yes, please attach)

yes

no

7- Do you have a permanent training site?

yes

no

Please specify: Classroom

Range

Shoot-house

Please specify its location:

8- If you use training facilities that are owned or operated by other by other companies or agencies, please list them here:



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9- How many permanent instructors do you employ? _____

10- How many part-time instructors do you employ? _____

11- What law enforcement / military / professional firearm training experience does each of your instructors have?

Five horizontal lines for text input.

12- How many students do you train in an average class? _____

13- What is your normal instructor to student ratio for the following types of training?

Range : _____

Scenarios: _____

14- How many classes did you or your staff present in the last 6 months?

Table with 2 columns: Number of students per class, Number of class per year. Rows for law enforcement only, military only, civilians only, mixed groups.

15- Do you provide training outside the United States?

Where? _____

What agencies? _____

How often? _____



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16- List three points of contacts for law enforcement, military, or security companies that are familiar with your operation.

Contact no. 1 Phone no: E-mail:
Contact no. 2 Phone no: E-mail:
Contact no. 3 Phone no: E-mail:

17- What type of training will be done using Simunition® products?

Four horizontal lines for text entry.

18- Do you sell products wholesale / retail?

yes [] no []

19- Indicate items that are sold by your company?

Guns [] Ammo [] Accessories [] Targets []
Training Equipment [] Other [] None []

20- What is your target date for being accepted onto the Simunition® Range Program?

(Note that acceptance process normally takes from 3 to 6 weeks)

Horizontal line for text entry.

21- Who do you plan to train? Check all that apply

Military [] Police [] Private Security [] Civilians []
Personal Protection Specialist [] Other [] Please specify

Horizontal line for text entry.

Date : _____

Name : _____

Signature : _____

(Hard copy to follow if approved for signature)