

# AFFIDAVIT OF IDENTITY

I, the undersigned, do hereby release and discharge Spartan Training Industries LLC and their representatives, league directors, league assistants, range officers, agents, servants, directors, employees, and/or any land owner, lessee or operating facility from any and all liability, of every kind and character, howsoever arising, including bodily injuries and loss or damage of property, sustained by me, my guest, and any other person or entity, having or asserting claims or rights, by, through or under me; and I do covenant and agree to HOLD HARMLESS AND INDEMNIFY the said entities and persons from any claims of the nature released or discharged, arising by, through or under me. I understand this is a onetime affidavit affecting me at any and all gatherings of Spartan Training Industries LLC. Course material includes content from the NRA, USCCA, BCI and other sources, used as a foundation to instruction, as well as the specific permit requirements for the certification you are seeking. It is your responsibility to pursue continuous education and knowledge for proficiency in the ownership and use of firearms. Disclaimer: Content related to local, state, or federal law is identified and referenced in course material. You are encouraged to seek legal counsel on any specific area that is unclear as a result of the course instruction. Instructors may have an opinion but are not a substitute for legal counsel.

I, \_\_\_\_\_

in the **COUNTY** of \_\_\_\_\_ in the **STATE** of \_\_\_\_\_

do hereby attest that:

1. My full and legal name is \_\_\_\_\_
2. My current address is \_\_\_\_\_
3. My email address is \_\_\_\_\_
5. My phone number is ( \_\_\_\_\_ ) \_\_\_\_\_
6. I understand that the purpose of this document is to demonstrate that I am the person identified above, will be the person participating in the scheduled online class and agree to hold Spartan Training Industries LLC harmless as stated above.
7. I swear that all the aforementioned information is true.

\_\_\_\_\_  
AFFIANT, Sign Here

\_\_\_\_\_  
DATE

**Please return completed form to:**

Spartan Training Industries, LLC  
Box 304  
Chaumont, NY 13622  
ATTN: Bill Kleftis

Insert front of Driver's License in Box;  
COPY, SCAN or PHOTOGRAPH



Bill Kleftis  
NRA, USCCA, NY, FL and UT Certified Pistol Instructor  
Spartan Training Industries, llc  
(717) 875-3839  
[firearmstrainer@verizon.net](mailto:firearmstrainer@verizon.net)  
Website: <https://www.spartantrainingindustries.com/>

Send, email or text this form to Spartan Training Industries, llc