



NJ Permit to Carry Qualification Course

WHEN: See dates below

WHERE: Shongum Sportsmen's Association Indoor Range and Classroom 363 Janes Chapel Road, Oxford, NJ 07863

COURSE GOAL: Provide the training and live fire qualification certificate to meet current NJSP requirements for application for a NJ Permit to Carry.

DESCRIPTION: The course is run by Bob Bajor of Gunskills.com. Bob is an NJ Certified Instructor. It starts with a 50 round live fire qualification (5 round strings, **distances from 21' to 30'**, timed and rapid fire, mostly two-handed grip, some one-handed strong hand and support hand). No holster draw. Shoot from high ready position. A minimum of 40 hits on an FBI Q target required to pass. A reshoot opportunity may be allowed if time allows. Bring extra 50 rounds of ammo in case. One mag per handgun is sufficient. Students who pass the qualification will be provided with the certificate that accompanies the NJ Permit to Carry Application. The instructions on the rest of the requirements can be found at <https://www.nj.gov/njsp/firearms/forms.shtml> (Passport photo must be 1.5" x 1.5".) Classroom training follows the live fire qualification.

FEE: \$85, **CURRENT MEMBERS ONLY including Pledges, family, and those on wait list as of 2/1/23.**

WHAT'S INCLUDED? NJ Concealed Carry Training, FBI Q Targets, live fire qualification

PREREQUISITES: There are no prerequisites for this course.

FIREARMS: Students bring personally owned CCW handguns (1 or 2), minimum 50 rounds ammo. Bring proof of purchase for the firearms (receipt or Pistol Purchase Permit copy) if available.

FOR MORE INFORMATION: Contact Rich Gajda (President@shongum.org)

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Circle Date(s), rank by preference on Table →

\$85 Shongum Member (Bring payment to class)
Cash (preferred) Or make check payable to Bob Bajor.

Rank	DATE	DAY	TIMES
_____	03/16/23	Thursday	6 PM to 10 PM
_____	04/06/23	Thursday	6 PM to 10 PM
_____	04/27/23	Thursday	6 PM to 10 PM

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Shongum Membership # _____

Date of Birth (mm/dd/yyyy) _____

Firearm Make/Model/Caliber _____

EMAIL THIS FORM TO PRESIDENT@SHONGUM.ORG. Students will be registered by email date/time. Limited to 10 students per class. More dates will be posted in the future.