

Ammunition Purchase Agreement

This form must accompany all ammunition orders.

*****Please put Order Number
or Salesperson's Name Here***** _____

We must request you submit a signed copy of this form, which must be either faxed or emailed to us before we are able to complete your order.

1. I am 21 years of age or older.
2. I am not prohibited from owning this product because of a criminal background, drug use, protective orders, or any other legally binding reasons.
3. My State, County, City or any other jurisdiction does not have laws restricting the purchase of this ammunition.

Print Name

Sign Name

Email address

This _____ Date of _____ 20_____

Please Return this form to:

Mail:
G T Distributors
Attn: Internet Orders
P.O. Box 16080
Austin, TX 78761-6080

Phone: 800-443-6283
Fax: 800-480-5845
Email: txsales@gtdist.com