

# Traders Academy

## Application

**Academy Acceptance #** \_\_\_\_\_ **(Required Before Completing Application)**

**Name:** \_\_\_\_\_

**Social Security Number:** \_\_\_\_\_

**Top Gun Brokerage, L.L.C. Account #:** \_\_\_\_\_

**Date:** \_\_\_\_\_ **Book Number:** \_\_\_\_\_

**Date Desired For Class:** \_\_\_\_\_

**Daytime Phone:** \_\_\_\_\_

**Evening Phone:** \_\_\_\_\_

**Payment Has Been**                      **Mailed**                      **Faxed:**

**Payment Amount**    \$ \_\_\_\_\_

(Print this form to your printer, and then FAX it to Traders Academy at 305.852.5423. If you choose to FAX your check, please attach it to the bottom of this form prior to placing it into the FAX machine.)