

ENTRY FORM - 2009 CMP National Rimfire Sporter Match

You may also enter on-line at clubs.odcmp.com/matches

Name	
Mailing Address <input type="checkbox"/> <i>Check here if you recently moved</i>	
City	State Zip
Email (will be used for entry confirmation)	Phone (day)
Date of Birth:	
<input type="checkbox"/> 4-H Club Entry Club Name & State: _____	
T-Shirt Size: <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> XL <input type="checkbox"/> XXL	
Please provide information about the rifle(s) you plan to fire: <input type="checkbox"/> T-Class: Make/Model _____ Type of rifle action: _____ Semi-auto _____ Manually operated <input type="checkbox"/> O-Class: Make/Model _____ Type of rifle action: _____ Semi-auto _____ Manually operated	
Check any applicable boxes below to indicate prior signing of a CMP Eligibility Affidavit and Liability Release: <input type="checkbox"/> I have previously attended a CMP Rimfire Sporter Match. <input type="checkbox"/> I have previously fired in CMP EIC or National Matches Events. <input type="checkbox"/> I have purchased a government-surplus rifle from the CMP.	
Squadding Request--I wish to fire on: <input type="checkbox"/> a morning relay, <input type="checkbox"/> an afternoon relay <input type="checkbox"/> morning & afternoon (2 events)	
Payment Amount: ONE EVENT: <input type="checkbox"/> \$25.00 (Adult) <input type="checkbox"/> Free (Junior) TWO EVENTS: <input type="checkbox"/> \$35.00 (Adult) <input type="checkbox"/> Free (Junior) <input type="checkbox"/> Visa <input type="checkbox"/> Master Card <input type="checkbox"/> Discover <input type="checkbox"/> American Express Number _____ CVV2#. _____ Name _____ Exp. _____	
Mail to: CMP Competitions, P.O. Box 576, Port Clinton, OH 43452 Fax: (419) 635-2573	