

ENTRY FORM

NAME \_\_\_\_\_  
                    Last                    First                    Middle

ADDRESS \_\_\_\_\_

\_\_\_\_\_  
City                                    State                                    Zip

Phone #s home \_\_\_\_\_

cell \_\_\_\_\_

Email \_\_\_\_\_

HP Classification \_\_\_\_\_

NRA Number \_\_\_\_\_

Circle One: Civilian      Service      Junior      Woman

Circle One: Match Rifle      Service Rifle      F-Class: FTR      F/O

Signature \_\_\_\_\_

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Gate Pass Information required for competitors without a DOD sticker.

**Full name above as appears on driver's license.**

Date of Birth \_\_\_\_\_ Driver's License No. State \_\_\_\_\_ # \_\_\_\_\_

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Yr.      Make/Color      Model of Vehicle      State and Tag No.

Auto Insurance Company \_\_\_\_\_

Policy # \_\_\_\_\_

Effective Date \_\_\_\_\_ Expiration Date \_\_\_\_\_

Weapon information:

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Make      Model      Serial Number      Caliber