

2015 National Rimfire Sporter Match

To enter the 2015 National Rimfire Sporter Match, complete this form or enter on-line at www.TheCMP.org.

For questions contact CMP Competitions, 419-635-2141, ext. 782, vsnyder@thecmp.org.

Mail your completed entry form and fees to: CMP, National Matches PO Box 576 Port Clinton, OH 43452

CMP Competitor Num.: (Leave blank if unknown):		Military Rank if Service: (Please give rank, not pay grade):	
Last Name:		First Name:	MI Suffix
Address: <input type="checkbox"/> Check here if you recently moved			
City:		State:	Zip
Phone:		Email:	
Date of Birth: (mm/dd/yyyy)		Gender:	
EVENT REGISTRATION: Please indicate which events you wish to participate in.			Junior Fee
<input type="checkbox"/> Rimfire Sporter Match One Event Entry, 1 August Please select One Relay time: <input type="checkbox"/> Relay 1, 8:00 AM - 9:45 AM <input type="checkbox"/> Relay 2, 10:00 AM -11:45 AM <input type="checkbox"/> Relay 3, 12:00 PM -1:45 PM <input type="checkbox"/> Relay 4, 2:00 PM -3:45 PM			\$10
<input type="checkbox"/> Rimfire Sporter Match Two Event Entries, 1 August Please select Two Relay times: <input type="checkbox"/> Relay 1, 8:00 AM - 9:45 AM <input type="checkbox"/> Relay 2, 10:00 AM -11:45 AM <input type="checkbox"/> Relay 3, 12:00 PM -1:45 PM <input type="checkbox"/> Relay 4, 2:00 PM -3:45 PM			\$15
TOTAL ENTRY FEES:			

Category <input type="checkbox"/> Civilian <input type="checkbox"/> Service	Indicate Civilian or Service status--must select one.
Junior Status – <u>Juniors Competitors Only</u> must select one.	<input type="checkbox"/> Junior 4H-Member <input type="checkbox"/> Junior Non-4H Member
Rifle Class 1 st Entry	<input type="checkbox"/> O-Class <input type="checkbox"/> T-Class <input type="checkbox"/> Tactical Class
Rifle Class 2 nd Entry	<input type="checkbox"/> O-Class <input type="checkbox"/> T-Class <input type="checkbox"/> Tactical Class
T-Shirt Size	Please enter S, M, L, XL, 2XL or 3XL.

Make checks payable to CMP. Payment may also be made by credit card - please provide the following information:		
<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover <input type="checkbox"/> American Express		
Number:	Exp:	CVV2#:
Name of Card Holder:	Signature:	
Address of Card Holder:		