

# Payment Form Camp Perry Open



**PAYMENT.** If your team has not already paid for this competition, please enclose a check or complete the Credit Card payment form below.

<b>Name of Team</b>	<b>Name—Team Coach</b>
<b>Mailing Address</b>	<b>Email Address</b>
<b>Team Members:</b>	

Please mail this form and checks to:

**By U. S. Mail**  
**Civilian Marksmanship Program**  
**ATTN: CMP Competitions**  
**P. O. Box 576**  
**Port Clinton, Ohio 43452**

**For Additional Information:** If you have any questions or require additional information, please contact CMP: Telephone, 419-635-2141 ext. 731, or email, [kharrington@thecmp.org](mailto:kharrington@thecmp.org)

<b>PAYMENT INFORMATION:</b> Please provide Credit Card information.		
<b>Credit Card (Check One):</b> <input type="checkbox"/> American Express <input type="checkbox"/> Discover <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa	<b>Total amount remitted:</b>	
	<b>Card Number:</b>	<b>Exp. Date:</b>
<b>Card holder name:</b>	<b>Card holder signature:</b>	<b>CVV:</b>