



TM

Garand/Springfield/Vintage/Modern Military Clinic Application

Please complete the information below and return this form to the CMP Competitions Department for approval. For more information, contact (419) 635-2141 Ext. 706 or kfilipiak@thecmp.org.

Club or State Association: _____

Club Number: _____ **Date of Application:** _____

Type of Event to Be Sanctioned (Circle one only): Sanctioned Clinic Sanctioned Clinic with Match

Type of Rifles (Circle all that apply):

Garand Springfield Vintage Military M1 Carbine Unlimited Garand Modern Military

Clinic will have a CMP- GSM Certified Master Instructor (Name): _____

Number of GSM Student Guides (CMP-Certified Master Instructors Only) _____ (Additional \$5.00 S/H)

Date(s) of clinic or clinic with match: _____

Location of clinic or clinic with match (city and state): _____

Check here if you would like surrounding clubs/states to be notified of your clinic.

Number of students expected: _____

Course of fire to be used (for clinics with matches): _____

Courses of fire for Garand, Springfield, Vintage Military, Modern Military and M1 Carbine Rifle Matches are listed in the current edition of the **CMP Competition Rules**.

Event Contact Person. Please list the person who will be the contact for competitors or clinic participants; please provide telephone # and email address that can be used in the CMP web site announcement, which is open to the public.

Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Telephone #: _____ **E-Mail:** _____

Club Web Site (if available) _____

Mail Packet to: _____

Address for mailing packet (NO PO BOX): _____

City: _____ **State:** _____ **Zip:** _____

Clinic or Clinic with Match Supplies. Sponsors of CMP-sanctioned clinics are eligible to request or purchase supplies and ammunition that is for use in the clinic. **Please complete the information below to request or order supplies or ammunition required for your clinic.**

<p>SCORECARDS: The CMP provides scorecards for use in sanctioned matches. Scorecards must be returned to the CMP after the match. Please indicate the type and number of scorecards requested.</p>		<p>G-S-M-M Course A (30 record shots) (#) _____ G-S-M-M Course B (50 record shots) (#) _____ M1 Carbine (40 record shots) (#) _____</p>
<p>AMMUNITION: Check to indicate if you would like ammo support. The CMP will notify you regarding the amount and total cost of the ammunition that may be purchased for your event. THE COST PER ROUND AND THE NUMBER OF ROUNDS MAY CHANGE WITHOUT NOTICE</p>		<p>___ Request ammo support. An ammo allocation form will be sent with the amount and cost of ammo you may purchase. ___ No ammunition support requested</p>
<p>CERTIFICATES: CMP certificates are available to award to all participants who complete a match or a clinic with a range firing activity. Please estimate the number of certificates required.</p>		<p>___ Certificates of Achievement requested (Certificates are free of charge)</p>
<p>ECIs (Empty Chamber Indicators): CMP Rules now require the use of ECIs in sanctioned rifle events. Event sponsors may order ECIs from CMP at a cost of \$4.99 for 12 ECIs. TAXABLE ITEM AL/OH CLUBS ONLY</p>		<p>___ ECIs (Empty Chamber Indicators) ordered (NLU #244, order 12-24-36-48, etc.)</p>
<p>ACHIEVEMENT PINS: Match sponsors may order CMP Achievement Pins for presentation or sale to competitors who fire achievement award scores that are given in the CMP Competition Rules. Please give the number of each type of pin requested. TAXABLE ITEMS AL/OH CLUBS ONLY</p>		<p>John C. Garand Pins, \$1.25 each ___ Gold ___ Silver ___ Bronze Springfield Rifle Pins, \$1.25 each ___ Gold ___ Silver ___ Bronze Vintage Military Rifle, \$1.25 each ___ Gold ___ Silver ___ Bronze M1 Carbine Pins, \$1.25 each ___ Gold ___ Silver ___ Bronze Modern Military Pins, \$1.25 each ___ Gold ___ Silver ___ Bronze</p>
		<p>Shipping & Handling Fee: \$6.95</p>
<p>PAYMENT INFORMATION:</p>		<p>CMP Match & Clinic Sanctioning Fee Per Day: \$20.00</p>
<p>Please send check (include CMP Club Number) or provide Credit Card information</p>	<p>Total pins ordered: _____ X \$1.25 each =</p>	
	<p>Total ECIs ordered: _____ units of 12 x \$5.24 =</p>	
	<p>OH Clubs Only Add 7% Tax AL Clubs Only Add 4% Tax (Anniston Only Club Add 10% Tax) Ship GSM Student Guides Additional \$5.00 S/H</p>	
		<p>TOTAL</p>
<p>Credit Card: Visa Master Card Discover American Express Card Number: _____ Expiration: _____</p>		<p>CVV2 #: _____ (3 digit code on back of card)</p>
<p>Card holder name: _____</p>		<p>Card holder signature: _____</p>
<p>Mail or fax completed Application Form with fees and a copy of the event program to: CMP, Attn: CMP Clinics/Sanctioned Matches, P. O. Box 576, Port Clinton, Ohio 43452 Fax (419) 635-2573</p>		