

2017 - 2018 Payment Form

CMP National Air Rifle Postal

Nov 2017 – Feb 2018



PAYMENT. If your team has not already paid for this competition, please enclose a check for \$5.00 per shooter, or complete the Credit Card payment form below.

Name of Team	Name—Team Coach
Mailing Address	Email Address
Team Members:	

Please mail this form and checks to:

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

For Additional Information: If you have any questions or require additional information, please contact CMP Postals: Telephone, 419-635-2141 ext. 731, or email, Postals@thecmp.org

PAYMENT INFORMATION: Please provide Credit Card information. The cost is \$5.00 per firing member.		
Credit Card (Check One): <input type="checkbox"/> American Express <input type="checkbox"/> Discover <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa	Total amount remitted:	
	Card Number:	Exp. Date:
Card holder name:	Card holder signature:	CVV: