



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](mailto: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):** M1 Carbine

Garand    Springfield    Vintage Military    Unlimited Garand    Modern Military    Unlimited Modern Military

**Clinic will have a CMP- GSMM 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 that is for use in the clinic. **Please complete the information below to request or order supplies required for your clinic.**

<p><b>SCORECARDS:</b> 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) (#) _____</p> <p>G-S-M-M Course B (50 record shots) (#) _____</p> <p>M1 Carbine (40 record shots) (#) _____</p>
<p><b>CERTIFICATES:</b> 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><b>ECIs</b> (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 \$7.50 for 12 ECIs. <b>TAXABLE ITEM FOR AL/OH CLUBS ONLY</b></p>		<p>_____ ECIs (Empty Chamber Indicators) ordered (NLU #244, order 12-24-36-48, etc.)</p>
<p><b>ACHIEVEMENT PINS:</b> Match sponsors may order CMP Achievement Pins for presentation or sale to competitors who fire achievement award scores that are given in the <b>CMP Competition Rules</b>. Please give the number of each type of pin requested. <b>TAXABLE ITEMS FOR AL/OH CLUBS ONLY</b></p>		<p>_____ Gold _____ Silver _____ Bronze John C. Garand Pins, \$2.00 each</p> <p>_____ Gold _____ Silver _____ Bronze Springfield Rifle Pins, \$2.00 each</p> <p>_____ Gold _____ Silver _____ Bronze Vintage Military Rifle, \$2.00 each</p> <p>_____ Gold _____ Silver _____ Bronze M1 Carbine Pins, \$2.00 each</p> <p>_____ Gold _____ Silver _____ Bronze Modern Military Pins, \$2.00 each</p> <p>_____ Gold _____ Silver _____ Bronze</p>
		<p>Shipping &amp; Handling Fee: <b>\$7.95</b></p>
<p><b>PAYMENT INFORMATION:</b></p>		<p>CMP Match &amp; Clinic Sanctioning Fee Per Day: <b>\$25.00</b></p>
<p>Please send check (include CMP Club Number) or provide Credit Card information</p>	<p>Total pins ordered: _____ X \$2.00 each =</p>	
	<p>Total ECIs ordered: _____ units of 12 x \$7.50 =</p>	
	<p><b>Ohio Clubs Only Add 7% Tax</b> <b>Alabama Clubs Only Add 4% Tax</b> <b>(Anniston Only Club Add 10% Tax)</b> <b>Ship GSM Student Guides Additional \$5.00 S/H</b></p>	
		<p>TOTAL</p>
<p>Credit Card: Visa    Master Card    Discover    American Express</p>		<p><b>CVV2 #:</b> (3 digit code on back of card)</p>
<p><b>Card Number:</b></p>		<p><b>Expiration:</b></p>
<p>Card holder name:</p>		<p>Card holder signature:</p>
<p><b>Mail completed Application Form with fees and a copy of the event program to:</b> <b>CMP, Attn: CMP Clinics/Sanctioned Matches, P. O. Box 576, Port Clinton, Ohio 43452</b> Scan to Kim Filipiak at <a href="mailto:kfilipiak@thecmp.org">kfilipiak@thecmp.org</a> Online Sanction <a href="https://ct.thecmp.org/app/v1/index.php?do=sanctionMatch">https://ct.thecmp.org/app/v1/index.php?do=sanctionMatch</a></p>		