

## 2022 CMP Long Range National Matches

To enter the 2022 CMP Long Range National Matches, complete this form or enter online at [www.TheCMP.org](http://www.TheCMP.org).

Last Name:	First Name:	MI	Gender:
Address: <span style="float: right;"><input type="checkbox"/> Check here if you recently moved</span>			
City:	State:	Zip	
Phone:	Email:		
Date of Birth: (mm/dd/yyyy)	CMP Competitor Number:		

EVENT REGISTRATION: Please indicate which events you wish to participate in.	Adult Fee	Junior Fee
<input type="checkbox"/> <b>Long Range Individual Match Package, 9-13 Aug</b> <span style="float: right;">Package includes all individual matches</span> Rifle Type: <input type="checkbox"/> Match Rifle/Iron Sights <input type="checkbox"/> Service Rifle <input type="checkbox"/> Palma Rifle <input type="checkbox"/> Match Rifle/Any Sights <input type="checkbox"/> AR Tactical Rifle <input type="checkbox"/> F-Open Rifle <input type="checkbox"/> F-T/R Rifle	\$190	\$95
<input type="checkbox"/> <b>Day 1 Long Range Individual Matches ONLY, 9 Aug</b> <span style="float: right;">Viale Memorial and Critchfield Memorial</span> Rifle Type: <input type="checkbox"/> Match Rifle/Iron Sights <input type="checkbox"/> Service Rifle <input type="checkbox"/> Palma Rifle <input type="checkbox"/> Match Rifle/Any Sights* <input type="checkbox"/> AR Tactical Rifle <input type="checkbox"/> F-Open Rifle <input type="checkbox"/> F-T/R Rifle	\$55	\$30
<input type="checkbox"/> <b>Day 2 Long Range Individual Matches ONLY, 10 Aug</b> <span style="float: right;">Kerr Memorial and Henry Memorial</span> Rifle Type: <input type="checkbox"/> Service Rifle <input type="checkbox"/> Palma Rifle <input type="checkbox"/> Match Rifle/Any Sights <input type="checkbox"/> AR Tactical Rifle <input type="checkbox"/> F-Open Rifle <input type="checkbox"/> F-T/R Rifle	\$55	\$30
<input type="checkbox"/> <b>Day 3 Long Range Individual Matches ONLY, 11 Aug</b> <span style="float: right;">McMaken &amp; Speaks Match</span> Rifle Type: <input type="checkbox"/> Service Rifle <input type="checkbox"/> Palma Rifle <input type="checkbox"/> Match Rifle/Any Sights <input type="checkbox"/> AR Tactical Rifle <input type="checkbox"/> F-Open Rifle <input type="checkbox"/> F-T/R Rifle	\$30	\$15
<input type="checkbox"/> <b>Day 4 Long Range Individual Matches ONLY, 12 Aug</b> <span style="float: right;">Baesel Memorial Match</span> Rifle Type: <input type="checkbox"/> Match Rifle/Iron Sights <input type="checkbox"/> Service Rifle <input type="checkbox"/> Palma Rifle <input type="checkbox"/> Match Rifle/Any Sights* <input type="checkbox"/> AR Tactical Rifle <input type="checkbox"/> F-Open Rifle <input type="checkbox"/> F-T/R Rifle	\$30	\$15
<input type="checkbox"/> <b>Day 5 Long Range Individual Matches ONLY, 13 Aug</b> <span style="float: right;">Camp Perry Palma Match</span> Rifle Type: <input type="checkbox"/> Service Rifle <input type="checkbox"/> Palma Rifle <input type="checkbox"/> Match Rifle/Any Sights* <input type="checkbox"/> AR Tactical Rifle <input type="checkbox"/> F-Open Rifle <input type="checkbox"/> F-T/R Rifle	\$50	\$25
<b>TOTAL ENTRY FEES:</b>		

**\*NOTE:** For the Viale Memorial Match, Critchfield Memorial Match, Baesel Memorial Match and Camp Perry Palma Match only, those competitors who elect to use match rifles optics (any sights) NOT in accordance with the match program will be permitted to fire, but those scores will NOT be counted towards any aggregate awards. An award will be given in that category providing there are five or more competitors.

Category <input type="checkbox"/> Civilian <input type="checkbox"/> Service	Indicate Civilian or Service status--must select one.
T-Shirt Size	<input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> X-Large <input type="checkbox"/> 2XL <input type="checkbox"/> 3XL

Make checks payable to CMP. Payment may also be made by credit card - please provide the following information:

Visa     MasterCard     Discover     American Express

Number:	Exp:	CVV2#:
---------	------	--------

Name of Card Holder:	Signature:
----------------------	------------

Address of Card Holder:
-------------------------

**For questions contact CMP Competitions, 419-635-2141, ext. 729, [srozanski@thecmp.org](mailto:srozanski@thecmp.org).**

**Email form to [Competitions@TheCMP.org](mailto:Competitions@TheCMP.org).**

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