

Monthly Matches

Credit Card / Check Payment Form

For Individuals or Teams

Please make sure that you have sent in your registration form or registered online. This form does NOT register you into the match.

Name of School or Club		Name—Instructor/Coach	
Credit Card Holder's Information			
Name (as it appears on front of card)		Daytime Phone Number	
Mailing Address		Email Address	
Names of Team Members/Individuals:			
For Camp Perry, OH Email/Mail Form To: Civilian Marksmanship Program ATTN: Monthly Matches P.O. Box 576 Port Clinton, OH 43452 Catherine Green – cgreen@thecmp.org 419-635-2141 ext. 704		For Anniston, AL Email/Mail Form To: Civilian Marksmanship Program ATTN: Monthly Matches 1470 Sentinel Drive Anniston, AL 36207 Renay Woodruff – rwoodruff@thecmp.org 256-835-8455 ext. 415	
PAYMENT INFORMATION: Please provide Credit Card information			
Total amount:			
Card Number:		Expiration:	
Card holder signature:		CVV2 #: <small>(3 digit code on back of card)</small>	