REQUEST FOR AGE WAIVER

Required for Service Pistol Participants under the age of 14 and .22 Rimfire Pistol Participants and Rifle Participants under the age of 12.

Name:		CMP Competitor #:		
Date of Birth:	Curr	Current Age:		
Address:				
City:	State:	Zip Code:		
Telephone #: ()	Email Ad	_ Email Address:		
Club Affiliation:				
Current NRA or CMP Classi	fication:			
The CMP strongly recomm	nends that all juniors pa	articipate in the Small Arms Firing School.		
STATI	E ASSOCIATION	CLUB ENDORSEMENT		
I, recommend that		be grante		
an age waiver to participate	(applicants i	name)		
an ago namen to parasipato	2020 . (4.110.14.	,		
(Date)		(Name and Signature)		
	(Pos	(Position Held in State Association/Club)		
Liability Rele	ase To Be Signe	d By Parent or Legal Guardian		
hereby: 1) Give my permission for other organizations sponsoring or workers) from any claim or liability	this Junior's participation in the supporting such activity (inclu- that may arise directly or indire- y, and hold harmless the part	n an activity of the Civilian Marksmanship Program (CMP) ne 2023 National Matches; and 2) Release the CMP and a ding all directors, officers, employees, agents, and volunte ectly from this Junior's presence or participation in the activities referred to in 2) above from any claim arising from an		
(Date)		(Signature of Parent or Guardian)		
	(Pleas	e Print Name of Parent or Guardian)		

Required: Please attach copies of match bulletins from 2-3 approved and registered matches in which the junior has competed.