



Junior Recognition Tournament

Official Registration Form

Name: _____ Last 4 SSN & Initials: _____

Address: _____ City: _____

State: _____ Zip: _____

Birthday: ____/____/____ Age: ____ How old were you on January 1, _____ (Ages 7 to 17 as of January 1)

Home Range: _____

Sponsor (Parent or Match Director): _____

Equipment List

Action: _____ Trigger: _____

Stock: _____ Barrel: _____

Scope & Power: _____ Ammo: _____

Gunsmith: _____

Scores (Three consecutive targets)

Target 1: _____ Target 2: _____ Target 3: _____

Date of Match: _____ Club: _____

Signature of Match Director: _____

Signature of Junior: _____

Match Director:

**Send this form to the Business Office along with your Sign-In Sheet and Match Report.
Targets DO NOT need to be sent to the Business Office.**

TOURNAMENT ENDS AUGUST 1