

Entry Form

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Optional: Telephone: _____ E- Mail: _____

Check the Class you will be shooting:

_____ VFS _____ Hunter _____ Custom _____ Factory

Caliber of Rifle _____

Junior Shooter? _____ Postal Rookie? _____ Benchrest Rookie? _____

Have you shot a registered match before? _____

Check enclosed for \$15.00 U.S. for one match _____

Check enclosed for \$60.00 U.S. for five matches _____

I wish to be a member of the team _____

Team Members: _____, _____, _____, _____.

I wish to be placed on a team but have no teammates at this time. _____

Checks are to be made out and sent to:

Steve Grosvenor
211 North 5th St
Beresford SD, 57004