



**2022**  
**Mt. Airy Sharpshooters Team Registration Form**

Participant Name \_\_\_\_\_ D.O.B. \_\_\_\_\_ Grade \_\_\_\_\_

Address: \_\_\_\_\_

Current School Attending: \_\_\_\_\_

Shooting Experience? NO YES (circle all applicable below)

SCTP AIM ATA Skeet Sporting Clays 4-H Scouts

Hunter Safety Graduate Target/Plinking Competitive Rifle/Pistol

Which gauge will you shoot? 20 12

Parent name(s) \_\_\_\_\_

Phone number(s) to best contact you: Parent Cell \_\_\_\_\_  
**(Voice and text)** Parent Cell \_\_\_\_\_  
Shooter Cell \_\_\_\_\_

E-Mail Address: Parent \_\_\_\_\_  
Parent \_\_\_\_\_

E-Mail Address: Shooter \_\_\_\_\_

Shooter T-Shirt Size (Adult Sizes): Sm Med Lg XL 2XL 3XL

**One parent or guardian MUST be present during shooting at all times.**

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Parent/guardian Signature

**Registration Fee:** \$175.00 1<sup>st</sup> child, \$125.00 each additional child

**Do not write below this line** \*Make checks payable to **Mt. Airy IWLA**

-----  
**Amount paid** \_\_\_\_\_ **Check #** \_\_\_\_\_ **Cash** \_\_\_\_\_