



2023
Mt. Airy Sharpshooters Team Registration Form

Participant Name _____ D.O.B. _____ Grade _____

Address: _____

Current School Attending: _____

Shooting Experience? NO YES (circle/check 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: \$195.00 1st child, \$145.00 each additional child

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

Amount paid _____

Check # _____

Cash _____