



2026 Sporting Clay Shoot Entry Form

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____

Check #: _____ Received: _____

Cash: _____ Received: _____

Credit Card: _____

Name on Credit Card: _____

Credit Card Number: _____

Expires: _____

Security Code: _____

Email: _____

Cell Phone #: _____

Preregistered on: _____

Checked IN: _____

Team Members (Teams of 4 or 5). If you don't have a team we will put you on a team the day of the event.

- | | |
|----------|----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |
| 5. _____ | |