

## **FCSA Match Registration Form**

Match L	Dates:		April 1	18 - 20 20	)25						
Locatio	n of Mat	ch:									
Name o	f Compe	titor:									
Address	<b>s:</b>										
City:				S	State:				Zip:		
Phone:				E	mail:						
Which Clas	ss(s) Will Yo	ou Be Comp	eting In: L	ight	Heavy	Unlimited	Hunte	er Ju [	nior		
Please	e note: You n	nay enter in 4	l classes – How	ever if you en	ter more than	2 classes <u>you</u> are r	esponsible to ha	ave someone	cover your p	it duties	
Are You	A Curren	t Member	of FCSA?	Yes	s No	Member	ship #:		Expires:		
\$5.00 per	· Class may	y be charge		s not submi	tted 2 week	ctor in advance as prior to the r					
Cost of	Match is	the num	nber of Cla	asses x	eac	h, plus FCSA	members	hip due	s & any la	ate fees.	
	Remember		•		·	in it requires the				<b>).</b>	
			Please No	te the Ar	nount of l	Money You I	Have Enclo	sed: \$			
Send the	registration	info and ch	neck to:			<b>X</b>					
Will You	Be Shari	ng Guns &	& Equipme	nt with Ot	her Comp	etitors?	Ye	es 🔲 l	lo		
If Yes, W	ا االا Who Will	ou Be Sh	aring With	n?	250						
What gu	ns or equ	ıipment w	vill you sha	re?							
Have Yo	u Ever Co	mpeted i	n The FCS/	A World Ch	nampionsh	nips?	Ye	es 🗌	No		
V	Vould you	ı object if	f photogra <sub>l</sub>	phs taken	of you dur	ing the matc	h were use	d by FCS	A in the V	HP	
(Very Hi	gh Power	r) Magaziı	ne or on th	e FCSA W	eb Site?	Yes I w	ould object:	No	I wouldn't i	mind:	
Please No	te: If the pr					is Match Director ur equipment/loa				don't mind if	
			l	Please sh	are your	equipment I	ist				
Class	Action	Barrel	Stock	Trigger	Scope	Gunsmith	Powder	Load	Primer	Bullet	
Signature of Competitor:							Date:				

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In order for this entry form to be accepted it must be accompanied by a signed copy of the Match Waiver and Release of Liability Form.