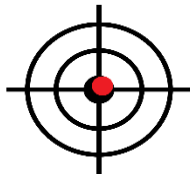


ENTRY FORM



**USARB
Indoor Air Rifle Benchrest
North Berwick Rod & Gun Club**

Date: _____

Name: _____

Email: _____ **Phone:** _____

Fees:

Club Shoot \$5.00 per Match

Regional Shoot \$20.00 per Match

1st Match

H V _____ \$ _____

L V _____ \$ _____

Open _____ \$ _____

Sp _____ \$ _____

2nd Match

HV _____ \$ _____

LV _____ \$ _____

Open _____ \$ _____

Sp _____ \$ _____

Total: _____