State Three-Position Air Rifle Junior Olympics

Team Registration Card

|  |  |  |  |
| --- | --- | --- | --- |
|  | | | |
| **Name of School or Club** | | Team Contact | |
| **Daytime phone** | | **Email** | |
| **Mailing Address** | | **Classes**  □ **Sporter OR** □ **Precision**  □ **Scholastic OR** □ **Club** | |
| **Please provide the name and competitor number of each person who will represent your school or club.** | | | |
| **Last/Family Name** | **First Name, MI** | **\*CMP Comp #\*** | **Position** |
|  |  |  | Instructor/Coach*(to be listed as head coach on results)* |
|  |  |  | Team Member |
|  |  |  | Team Member |
|  |  |  | Team Member |
|  |  |  | Team Member |

The four members of this team must be selected prior to the event. Should the team qualify for Nationals, the members may be changed.

Look up CMP Numbers at: <http://odcmp.com/Competitions/CreateACMPNumber.pdf>

This form must be submitted by the match director to CMP with the match results.