

PRE-REGISTRATION FORM FOR MUCC STATE SHOOT

MUCC CLUB NAME: _____
TEAM TYPE: () MENS () LADIES () SENIOR () JUNIOR () SUB-JUNIOR
Age Breakdowns: Senior 60 & over; Junior 15-17; Sub-Junior 14 & Under

EVENT: Skeet Trap

TEAM CAPTAIN or INDIVIDUAL E-Mail Address: _____
NAME: _____ Sat Sun 9 10 11 12 1 2 3 4 5
CLASS (Circle One): Male Female Senior Sub-Junior Junior (Circle Day & Time)
PHONE NO. DAY: _____ NIGHT: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

SHOOTER TWO: _____ Sat Sun 9 10 11 12 1 2 3 4 5
CLASS (Circle One): Male Female Senior Sub-Junior Junior (Circle Day & Time)

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

SHOOTER THREE: _____ Sat Sun 9 10 11 12 1 2 3 4 5
CLASS (Circle One): Male Female Senior Sub-Junior Junior (Circle Day & Time)

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

SHOOTER FOUR: _____ Sat Sun 9 10 11 12 1 2 3 4 5
CLASS (Circle One): Male Female Senior Sub-Junior Junior (Circle Day & Time)

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

SHOOTER FIVE: _____ Sat Sun 9 10 11 12 1 2 3 4 5
CLASS (Circle One): Male Female Senior Sub-Junior Junior (Circle Day & Time)

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

We agree to abide by the Rules and Regulations furnished with this application, and agree that all the decisions of the MUCC State Shoot Committee will be final. Note: You must be **able to prove membership** in good standing of this affiliated club, if challenged. If you can't, you will be disqualified. Rules can be downloaded at www.muccstateshoot.com, www.northmacomb.info or www.huronpointe.org.

EYE & EAR PROTECTION REQUIRED IN ALL FIREARM EVENTS

Certified By: _____ Date: _____

Team Captain/Individual or Club Official

PLEASE DUPLICATE THIS FORM FOR EACH EVENT

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ADDITIONAL INSTRUCTIONS FOR PRE-REGISTRATION FORM

- Use one registration form per individual or team per event.
- For individual shooters, fill in the Captain section for the registration form.
- When form(s) are completed, with the Captain's and Team member's or Individuals name, address, phone number, event type, class type including what type of Junior (Junior, Sub-Junior, Sub Sub Junior) shooting time and day, mail with check of the entry fees for each event to the address below. No individual or team will be squadded without full payment. See event flier or rules for fees.
- **For confirmation, please include self-addressed stamped envelope.**
- Requests are honored in the order received. Preference is given to the individual or team traveling the greatest distance, in case of duplicate requests.
- If you register by phone: Phone registrations are only held for seven calendar days, for the check to arrive. After the seventh day the spot will be forfeited and the next available team or individual will get that spot. 4) Use one registration form per individual shooter or team for each event.
- When pre-registering teams with less than five members, leave the extra lines blank.
- Events that require all members of a team to shoot together must squad together and include the first and last names and addresses of each team member.
- Times on the application are rounded off to the hour. Shooting times are not exactly on the hour for some events. For actual shooting time, report to registration at least one hour early on the day of the shoot (if confirmation wasn't requested).
- MUCC Teams have preference in registration until 3 weeks prior to shoot, and then individual shooters can be squadded. We still urge individual shooters to send in their registrations early and will be squadded in the order as received.

**Make Checks Payable to:
North Macomb Sportsmen's Club**

PLEASE SEND PRE-REGISTRATION FORM & CHECK TO:

Mark Fedders
c/o MUCC State Shoot
18489 Millstone Drive
Macomb, MI 48044