



Date: \_\_\_\_\_

Office Use Only # \_\_\_\_\_

Team/Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Entry Information: Please mark as appropriate

**EARLY BIRD DRAWING - CASE OF SHELLS  
DEADLINE APRIL 1ST**

**OPTIONS:**

- Sponsor Level \_\_\_\_\_ See attached opportunities-----\$ \_\_\_\_\_
- Team of 4 \$500 (Includes shoot ,PF memberships and luncheon)-----\$ \_\_\_\_\_
- Team of 5 \$625 (Includes shoot, PF memberships and luncheon)-----\$ \_\_\_\_\_
- Indiv. Shooter \$125 (Includes shoot, PF membership and luncheon)---\$ \_\_\_\_\_
- Competitive Optional Purse \$100/team (100% Payout)-----\$ \_\_\_\_\_
- Non-Shooter luncheon and PF membership \$50-----\$ \_\_\_\_\_
- Non-Shooter Extra Meals \$25 -----\$ \_\_\_\_\_
- Shot Shell Drawing 1/\$20 or 6/\$100 (AR 10 in 6.5 Creedmoor) -----\$ \_\_\_\_\_
- Dog Tag Drawing 1/\$40 or 3/\$100 (Super Black Eagle)-----\$ \_\_\_\_\_
- Card Draw 1/\$10 (Henry AR-7 .22)-----\$ \_\_\_\_\_
- Bonus Station \$10/chance/shooter (Adirondack Furniture Set)-----\$ \_\_\_\_\_
- Optional Donation-----\$ \_\_\_\_\_

**TOTAL FEES DUE:** \$ \_\_\_\_\_

My signature hereto for myself, my heirs, executors and assignees; I do hereby fully and forever discharge the CSCA/NSCA Board of Directors, CSCA/NSCA affiliated range, and shooting members from any and all claims and demands, actions, causes of action, damage, costs, loss of service, expense, and any and all other claims whatsoever, both in law and in equity on account of, or in any way resulting from personal injuries, or indirectly, the use of facilities or participating in activities of this shooting event. The release shall include but not be limited to damages or loss associated with sporting clay target shooting, use of vehicles, and any other activity incidental to my voluntary use and enjoyment of the facilities/activities provided by the CSCA/NSCA or Affiliated Range Member. The release shall include but not be limited to damage or loss associated with the negligence of the CSCA/NSCA Range Member or any other person using the facilities/activities of the range. I agree, stipulate, and covenant to indemnify and hold forever harmless the CSCA/NSCA Affiliated Range and shooting members from any and all actions and any and all claims for damage whatsoever which may hereafter arise from the negligence of myself or any other person or entity willful or wanton, or intentional acts or actions. I am aware of and acknowledge the danger associated with the use of the facilities/activities of the CSCA/NSCA.

**Shooter Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Return registration form: **Morgan County Pheasants Forever, PO Box 57, Fort Morgan, CO** or Register online at  
[www.morgancountypf.org](http://www.morgancountypf.org) or email registration to [Tim.Amen79@gmail.com](mailto:Tim.Amen79@gmail.com)