

REGISTRATION FORM

Competitor No _____

If information below has changed since the last time you shot here, please check ___

First Name _____ Last Name _____

USPSA No _____ Class _____ Major _____ Minor _____

Open _____ Limited _____ Ltd 10 _____ Production _____ Revolver _____

Check all that apply:

Female _____ Law _____ Military _____ Jr _____ Sr _____ Foreign _____

You only need to fill out information below once unless something has changed

Address _____

City _____ State _____ Zip _____

Phone _____ E-Mail _____

MAKE CHECKS PAYABLE TO CVSC

Fold and Tear/Cut Here