

NATIONAL RIFLE ASSOCIATION
Competitive Shooting Division – Pistol Department
ATTN: Elizabeth Martin
11250 Waples Mill Road
Fairfax, VA 22030

**NRA REGIONAL CHAMPIONSHIP
REGISTRATION FEE REPORTING FORM**

TOURNAMENT #: _____

Regional Location and Date: _____

This form must be completed by the sponsor and returned to the NRA with appropriate remittance immediately following the tournament.

NRA REGISTRATION FEE

_____ Regional Competitors at \$8.00 each \$ _____

_____ Teams at \$5.00 each \$ _____

_____ Dist. Revolver Competitors at \$5.00 each \$ _____

Total amount due: \$ _____

Total award points used for payment: \$ _____

Total remitted (less award points)
- Make checks payable to NRA \$ _____

NRA FURNISHED AWARDS POINTS USED

High Team (at least 2 teams, for winning team only) – 20 points (5 per member).

Award points furnished by NRA: \$ _____

SPONSORING ORGANIZATION: _____

ADDRESS: _____

CITY/STATE/ZIP CODE: _____

PHONE: _____

EMAIL: _____

Submitted by (Please Print): _____

Signature and Date: _____