## NRA NATIONAL OPEN **STANDARD PISTOL** SECTIONAL INDIVIDUAL/TEAM ENTRY AND SCORECARD (PLEASE PRINT OR TYPE)

**SPECIAL CATEGORY - CIRCLE IF APPLICABLE** 

NRA MEMBERSHIP/CLASSIFICATION NUMBER (REQUIRED):

		W	'OM	AN	JUN	IOR	SEN	IOR	GRAN	D JLINI	
NAME:		Cl	URR	ENT N	RA S	TANDA	RD PI	STOL	CLASSIF	ICATIO	ON:
ADDRESS:	N	ΛAS	TER	E	XPER	Т	SHARF	SHOC	OTER	MARKS	MAN
CITY, STATE, ZIP		_		TOTAL	CIIO	TC	1		CODE		
PHONE: (include area code):		$\vdash$	TOTAL SHOTS				SCORE				
COMPETITORIC CERTIFICATION		60									
COMPETITOR'S CERTIFICATION  I certify that the scores on this card are correct and that the classification and category I have checked on this card is the one I am presently authorized to use according to NRA rules.		core	e of 5	560 or h	igher.				etitors in g	•	
ase according to Mirriales.	1st String		2nd String		3rd String		4th String		5th Stri	ng 6t	h String
DATE: SIGNATURE:											
DATE & LOCATION OF SECTIONAL:	TOTAL NUMBER OF:										
	1's	2	2's	3′s	4's	5's	6's	7's	8's	9′s	10's
							<u> </u>		1	l	
NRA NATIONAL OPEN <b>STA</b> INDIVIDUAL/TEAM EN (PLEASE PR	ITRY AND	SCO				-					
	ITRY AND	SC( PE)	ORE	ECARD PECIAL		EGORY	<b>Y - CIR</b> ( SEN)		<b>APPLIC</b> GRAN	ABLE ID SENI	OR
INDIVIDUAL/TEAM EN (PLEASE PR	ITRY AND	SCO PE)	SI 'OM	PECIAL AN	<b>CAT</b>	<b>EGOR</b> Y	SEN	IOR		D SENI	
INDIVIDUAL/TEAM EN (PLEASE PR  NRA MEMBERSHIP/CLASSIFICATION NUMBER (REQUIRED):	ITRY AND INT OR TY	SC(PE)	SI 'OM	PECIAL AN	<b>CAT</b>	EGORY IOR FANDA	SEN	IOR STOL	GRAN	D SENI	ON:
INDIVIDUAL/TEAM EN (PLEASE PR  NRA MEMBERSHIP/CLASSIFICATION NUMBER (REQUIRED):  NAME:	ITRY AND INT OR TY	SC(PE)	SI OMA URR TER	PECIAL AN EENT N	JUN RA ST	EGORY IOR FANDA	SEN	STOL	GRAN CLASSIF DTER	ID SENI	ON:
INDIVIDUAL/TEAM EN (PLEASE PR  NRA MEMBERSHIP/CLASSIFICATION NUMBER (REQUIRED):  NAME:  ADDRESS:	ITRY AND INT OR TY	SC(PE)	SI OMA URR TER	PECIAL AN ENT N E TOTAL	JUN RA ST  XPER	EGORY IOR FANDA	SEN	STOL	GRAN	ID SENI	ON:
INDIVIDUAL/TEAM EN (PLEASE PR  NRA MEMBERSHIP/CLASSIFICATION NUMBER (REQUIRED):  NAME:  ADDRESS:  CITY, STATE, ZIP  PHONE: (include area code):	ITRY AND INT OR TY	SC(PE)	SI OMA URR TER	PECIAL AN ENT N E TOTAL	JUN RA ST	EGORY IOR FANDA	SEN	STOL	GRAN CLASSIF DTER	ID SENI	ON:
INDIVIDUAL/TEAM EN (PLEASE PR  NRA MEMBERSHIP/CLASSIFICATION NUMBER (REQUIRED):  NAME:  ADDRESS:  CITY, STATE, ZIP  PHONE: (include area code):  COMPETITOR'S CERTIFICATION  I certify that the scores on this card are correct and that the classification and category I have checked on this card is the one I am presently authorized to	ITRY AND INT OR TY	W CUMAS:	SIF (OM) URR TER er of 6	PECIAL AN ENT N E TOTAL 6 10's, 9's 560 or h	JUN RA ST XPER SHO	EGORY IOR TANDA T	SENI SHARF	STOL (S)	GRAN CLASSIF DTER	FICATIO MARK	SMAN
INDIVIDUAL/TEAM EN (PLEASE PR  NRA MEMBERSHIP/CLASSIFICATION NUMBER (REQUIRED):  NAME:  ADDRESS:  CITY, STATE, ZIP  PHONE: (include area code):  COMPETITOR'S CERTIFICATION  I certify that the scores on this card are correct and that the classification and	Fill in nu	W CI MAS	SIF OMA	PECIAL AN ENT N E TOTAL 6 10's, 9's 560 or h	JUN RA ST  XPER  SHO  i, 8's et igher.  nolly.	EGORY IOR TANDA T	SENI SHARF  e top 3 low nat	STOL (S)	GRAN CLASSIF DTER SCORE	MARK  your see	SMAN
INDIVIDUAL/TEAM EN (PLEASE PR  NRA MEMBERSHIP/CLASSIFICATION NUMBER (REQUIRED):  NAME:  ADDRESS:  CITY, STATE, ZIP  PHONE: (include area code):  COMPETITOR'S CERTIFICATION  I certify that the scores on this card are correct and that the classification and category I have checked on this card is the one I am presently authorized to	Fill in nu firing a s	W CI MAS	SIF OMA	PECIAL AN EENT N E TOTAL 6 10's, 9's 560 or h 15.4(d) c	JUN RA ST  XPER  SHO  i, 8's et igher.  nolly.	EGORY IOR TANDA T TS c. for th	SENI SHARF  e top 3 low nat	STOL (S)	GRAN CLASSIF DTER SCORE	MARK  your see	SMAN  ctional vill be
INDIVIDUAL/TEAM EN (PLEASE PR  NRA MEMBERSHIP/CLASSIFICATION NUMBER (REQUIRED):  NAME:  ADDRESS:  CITY, STATE, ZIP  PHONE: (include area code):  COMPETITOR'S CERTIFICATION  I certify that the scores on this card are correct and that the classification and category I have checked on this card is the one I am presently authorized to use according to NRA rules.	Fill in nu firing a s	W CI MAST	SIFOMA  TER  er of 5  ule 1  2nd	PECIAL AN ENT N E TOTAL 10's, 9's 660 or h 15.4(d) c d String	JUN RA ST  XPER  SHO  i, 8's et igher.  nolly.	EGORY IOR TANDA T TS c. for th	SENI SHARF  e top 3 low nat	STOL (S)	GRAN CLASSIF DTER SCORE	MARK  your see	SMAN  ctional vill be
INDIVIDUAL/TEAM EN (PLEASE PR  NRA MEMBERSHIP/CLASSIFICATION NUMBER (REQUIRED):  NAME:  ADDRESS:  CITY, STATE, ZIP  PHONE: (include area code):  COMPETITOR'S CERTIFICATION  I certify that the scores on this card are correct and that the classification and category I have checked on this card is the one I am presently authorized to use according to NRA rules.  DATE:  SIGNATURE:	Fill in nu firing a s broken	W CI MAS:	SIFOMA  TER  er of 5  ule 1  2nd	PECIAL AN ENT N E TOTAL 10's, 9's 660 or h 15.4(d) c d String	JUN RA ST  XPER  SHO  i, 8's et igher.  nolly.	EGORY IOR TANDA T TS c. for th	SENI SHARF  e top 3 low nat	STOL (S)	GRAN CLASSIF DTER SCORE	MARK  your see	SMAN  ctional vill be