



# NRA INTERCOLLEGIATE CHAMPIONSHIPS

March 17-20, 2018 – Pistol

March 23-25, 2018 – Rifle Club

Fort Benning, Georgia

## PERSONNEL AVAILABILITY FORM

Please fill out the form completely.

FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_

MEMBER ID: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

EVENING PHONE: \_\_\_\_\_ DAY PHONE: \_\_\_\_\_

PHYSICIAN: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_ PHONE: \_\_\_\_\_

SHIRT SIZE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**MEDICAL INFORMATION:** Do you have medical insurance?  No  Yes, my provider is: \_\_\_\_\_  
Do you have any physical limitations or health conditions (s) that require you to limit your activities or working conditions? **Please be specific** and describe how to avoid any complications.

\_\_\_\_\_

**ALLERGIES:** I have the following allergies / I am allergic to:

- Seasonal       Penicillin       Insect Stings       Nuts       Aspirin
- Other(s) \_\_\_\_\_

**MEDICATIONS:** I am taking the following medications (please print legibly and be specific):

- 1. \_\_\_\_\_ mg      2. \_\_\_\_\_ mg
- 3. \_\_\_\_\_ mg      4. \_\_\_\_\_ mg
- 5. \_\_\_\_\_ mg      6. \_\_\_\_\_ mg
- 7. \_\_\_\_\_ mg      8. \_\_\_\_\_ mg

**CERTIFICATIONS:**

- NRA Certified Instructor       NRA Certified Coach       NRA Referee       CPR
- NRA Training Counselor       NRA Chief Range Safety Officer       Current 2017EMT/First Responder
- NRA Classified Shooter       NRA Range Safety Officer       Other \_\_\_\_\_
- NRA National Coach Development Staff       Other \_\_\_\_\_

**SPECIAL SKILLS** (Please list any special skills you have - photography, public relations, sales, etc...):

\_\_\_\_\_

**VOLUNTEER EXPERIENCE:** (Please check one)

- I have never volunteered for a shooting competition or any NRA event before.
- I am a returning volunteer; I have previously volunteered at the following NRA events:

\_\_\_\_\_

**HOUSING:**  Smoking  Non-Smoking

No thank you, I live within 20 miles of the event and will provide my own housing.

Yes, I will need NRA provided housing. I would like to request housing with the following person(s):

\_\_\_\_\_ who is a  volunteer  non-volunteer

\_\_\_\_\_ who is a  volunteer  non-volunteer

\_\_\_\_\_ who is a  volunteer  non-volunteer

**ASSIGNMENT REQUEST (March 16-25, 2018, or any part therein):**

- Range Assistance
- Scoring
- Office Staff if available

**\*\*NOTICE:** Volunteers are scheduled to arrive March 16 for check-in and to begin work, and scheduled to depart March 26. Early arrivals cannot be accommodated. If you arrive earlier than the scheduled arrival date, you will be required to self-pay housing for those early nights.

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**ICP Volunteer Perks:**

Intercollegiate Volunteers who are accepted will be compensated with the following during this event:

- \$20/day per diem
- Free Hotel Room (location to be determined)
- 1 Championship T-shirt
- Free Volunteer Banquet Thank You Dinner
- Volunteer Event Certificate of Appreciation

**\*\*Travel expenses are the responsibility of the volunteer.**

Confirmations and information packets will be mailed to you in February. Please direct all future questions regarding this championship to the Collegiate Department Manager, Victoria Croft, at **703-267-1473** or email:

**vcroft@nrahq.org**

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**APPLICANT SIGNATURE:** I, \_\_\_\_\_, certify that the above information is true to the best of my knowledge.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Mail completed application to: NRA Competitive Shooting Division,  
Attn: Tournament Resources Department, 11250 Waples Mill Road, Fairfax, VA 22030

Fax: 703-267-3941 Email: assistnra@nrahq.org