

2024 ACTPA ISSF CHAMPIONSHIPS ENTRY FORM

Instructions: Complete form either manually or electronically (preferred). Entry form must be signed. Use of digital certificates for Adobe users is available, all other users must use a Wet signature (print, sign and scan)

Name: _____

Phone: _____ Club: _____

Email _____

RECORD GRADE NEXT TO THE MATCHES YOU WISH TO ENTER

25M Centre Fire – Men	25M Pistol – Women	25M Pistol – Junior
10M Air Pistol – Men	10M Air Pistol – Women	10M Air Pistol – Jnr Men
25M Rapid Fire		10M Air Pistol – Jnr Women
50M Pistol	10M Air - Men WSPS	25M Pistol - Youth
25M Standard Pistol	10M Air - Women WSPS	10M Air Pistol – Youth Men
25M Pistol - WSPS	50M Pistol -WSPS	10M Air Pistol – Youth Women

MY PREFERENCES FOR RANGE DUTY ARE

Range Officer	<input type="checkbox"/>	Register Keeper	<input type="checkbox"/>	Patcher/Target Changer	<input type="checkbox"/>
Caller	<input type="checkbox"/>				

SPECIAL REQUESTS

I wish to shoot Friday Standard Pistol @ 3:15pm Air Pistol @ 6:00 pm

Other: _____

FEES & PAYMENT

Entry fee:		matches @ \$15 per match	\$	Direct Deposit
Bunking at Clubhouse:		nights @ \$40 per night	\$	
TOTAL			\$	Date:

BSB: 325 385 Account No.: 03417491 Account Name: Canberra National Pistol Club Inc Reference: ISSF + your name

DECLARATION Note: Entry form must be signed before entry will be accepted.

- I certify that I am a current financial member of Pistol Australia.
- I acknowledge that participation in the above competition may expose me to dangers inherent in the sport.
- I further acknowledge that to participate in the competition I will enter the premises of the Canberra National Pistol Club Inc. ("the Club") ABN 56 930 350 109, situated at 20 Mount Ainslie Drive, Campbell, A.C.T.
- I hereby discharge, release, acquit and forever hold harmless the Club, its officers, employees and agents from and against all claims, suits, demands, and actions which I, my heirs, executors, assigns and successors may have against the Club arising from any loss, costs, damage, illness or injury (including death) that I might suffer as a result of my participation in the competition or my entry onto the premises of the Club for that purpose.

Choose signature type: Wet Signature

Dated the _____ day of _____, 2024

Signed _____ Version: 2024.02