



2015 AR AIM State Championship

≧ REGISTRATION FORM ≦

PRE-REGISTRATION - MANDATORY

Shoot Date: Tuesday - 06/16/2015

Shoot Information

Team Name or Parent Name (if Individual): _____

Gun Club/Shoot Location: Arkansas Game & Fish Foundation Shooting Sports Complex

Location: 2800 Graham Rd. - Jacksonville, AR 72076 - 501-241-2441

Coach Information (or Parent Information for Individual)

Coach's Name: _____ Coach's Cell Number: _____

Coach's Address: _____

Coach's City: _____ State: _____ Zip: _____

Coach's Email: _____

Other Information

• MORE AWARDS in 2015 INCLUDING \$2,400 ADDED MONEY! • MUST PRE-REGISTER BY 6/9/15 • See accompanying program for important details • Current ATA-AIM & ASTF (state) memberships required prior to shoot • Squad below in order of shooting; Team or Individual • Furnish your own ammunition • Ammo available in ProShop • 100 Singles targets • Shoot cost \$36 payable day of shoot only; cash or check payable to 'ASTF' • Stay for the GREAT PRIZES to be awarded in LUCKY NUMBER SHOOTOFFS

AIM CATEGORY (below):

Age 11 & Under	Pre-Sub
Age 12 - 14	Sub-Junior
Age 15 - 17	Junior
Age 18 - 23	Jr. Gold

A shooter's AIM Category is established on the first day of the target year that runs 9/1 through 8/31. To determine category, ask 'What was the shooter's age on SEPTEMBER 1, 2014?'

The shooter's AIM Category remains the same throughout the target year. A shooters 'AIM Category' and their 'ATA Category' may not always be the same as outlined in the ATA Rulebook.

Shooter Information

POST #1

___ TEAM or ___ INDIVIDUAL (check one) DOB: ___/___/___ Category: _____ Average: _____

ATA#: _____ First Name: _____ Last Name: _____

POST #2

___ TEAM or ___ INDIVIDUAL (check one) DOB: ___/___/___ Category: _____ Average: _____

ATA#: _____ First Name: _____ Last Name: _____

POST #3

___ TEAM or ___ INDIVIDUAL (check one) DOB: ___/___/___ Category: _____ Average: _____

*ATA#: _____ First Name: _____ Last Name: _____

POST #4

___ TEAM or ___ INDIVIDUAL (check one) DOB: ___/___/___ Category: _____ Average: _____

ATA#: _____ First Name: _____ Last Name: _____

POST #5

___ TEAM or ___ INDIVIDUAL (check one) DOB: ___/___/___ Category: _____ Average: _____

ATA#: _____ First Name: _____ Last Name: _____

■ ALL FEES PAYABLE TO 'ASTF' DAY OF SHOOT ONLY ■ PLEASE PRINT & COMPLETE FORM(S) ■

REG. FORM(S) DUE: TUE. - JUNE 9th Mail to: AIM Registration - C/O Renae Chambless
[61 Vestal Drive, Lonoke, AR 72086](mailto:rchambless@suddenlink.net) or Scan & email forms to: rchambless@suddenlink.net

Questions: Call Devon Melbourne at 870-751-0296 or Renae Chambless at 501-676-3255... after 5:30 p.m.