

**NRA NATIONAL OPEN SECTIONAL - SPORTER AIR RIFLE - TEAM SCORING REPORT  
(PLEASE PRINT)**

TEAM NAME: \_\_\_\_\_

CLUB REPRESENTED: \_\_\_\_\_ NRA CLUB# \_\_\_\_\_

COACH NAME: \_\_\_\_\_ COACH #: \_\_\_\_\_ TEAM CAPT: \_\_\_\_\_

STREET & NUMBER: \_\_\_\_\_

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

**Note: All team members must fire in the same Sectional and at the same location.**

|  |        |              |          |   |
|--|--------|--------------|----------|---|
| <b>TEAM CLASSIFICATION: (CIRCLE ONE)</b> |        |              |          | Complete one card for each team and send to NRA IMMEDIATELY following the Sectional |
| MASTER                                   | EXPERT | SHARPSHOOTER | MARKSMAN |   |

| NAME | NRA ID# | CLASS |  | SCORE |
|------|---------|-------|--|-------|
|      |         |       |  |       |

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|------|---------|-------|--|-------|
|      |         |       |  |       |

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|------|---------|-------|--|-------|
|      |         |       |  |       |

| NAME | NRA ID# | CLASS |  | SCORE |
|------|---------|-------|--|-------|
|      |         |       |  |       |

|                         |              |
|-------------------------|--------------|
|                         | <b>TOTAL</b> |
| <b>TOTAL TEAM SCORE</b> |              |

Sectional location: \_\_\_\_\_ Date: \_\_\_\_\_