NRA INTERCOLLEGIATE PISTOL CHAMPIONSHIPS NRA INTERCOLLEGIATE RIFLE CLUB CHAMPIONSHIPS Please fill out form completely. *Starred items are REQUIRED for new and returning personnel APPLICATION DEADLINE: MARCH 2, 2016

*FIRST NAME:	*LAST NAME:	
0		e of my general contact info has changed.
MEMBER ID:	Are you 18 years of age or older? □No □ Yes	
ADDRESS:		
CITY:	STATE:	ZIP:
EVENING PHONE:	DAY PHO.	
EMERGENCY CONTACT:	PHONE:	
SHIRT SIZE:	EMAIL:	
CERTIFICATIONS:		
□ NRA Certified Instructor	□ NRA Certified Coach	□ NRA Referee □ CPR
□ NRA Training Counselor	□ NRA Chief Range Safety Officer	Current EMT/First Responder
□ NRA Classified Shooter	□ NRA Range Safety Officer	□ Other
□ NRA National Coach Deve	elopment Staff	□ Other
□ I am returning and this will	NRA event before. ing NRA event(s) before: l be my year of service.	? (i.e: 10m RSO, Office Support, 50m CRO)
Vorkstation:	Position:	
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COMMENTS:		

***HOUSING:**

□ No thank you, I will provide my own housing. (NRA will not reimburse housing costs)

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

____who is support personnel.

Date:___

***ASSIGNMENT REQUEST:**

(Intercollegiate Pistol Championships: March 13-17) (Intercollegiate Rifle Club Championships: March 18-20)

□ Range Assistance

□ Office Staff

CRO / Asst. CRO

□ Statistical Officer

□ Referee / Jury Chairman

Match Director

NOTICE: Personnel are scheduled to arrive 1 day before beginning work, and depart 1 day after completing work. The dates listed above are work dates. Early arrivals cannot be accommodated. If you arrive earlier than your scheduled arrival date, you will be required to self-pay for those early nights.

Confirmations and information packets will be e-mailed to you in February. Please direct all future inquiries regarding these championships to the Collegiate Program National Manager, Victoria Croft, at 703.267.1473 or <u>vcroft@nrahq.org</u> You can find additional information here as well: <u>http://collegiate.nra.org/</u>

By signing below I certify that I am not prohibited by any federal, state, or local law, ordinances, or regulation from possessing, purchasing, using, or having access to firearms and/or ammunition.

*APPLICANT SIGNATURE: I, _____, certify that the above information is true to the

best of my knowledge. Your Signature:_____

APPLICATION DEADLINE: FEBRUARY 28. 2015

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

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