



P.O. BOX 143, CHURCH CREEK, MD 21622

RABBIT/TRAP SHOOT

ADULT & YOUTH (12 – 17)

OCTOBER 10, 2010

4669 GOLDEN HILL RD
CHURCH CREEK, MD

REGISTRATION: 8:30 A.M.

START TIME: 9:30 A.M.

FEE: \$35.00

(INCLUDES LUNCH AND 25 TARGETS & AMMO)

\$\$\$ PRIZE MONEY \$\$\$

FIRST PLACE -- \$100.00

SECOND PLACE -- \$75.00

PRE-REGISTRATION REQUIRED AND MUST BE POST-MARKED BY 09-20-10

INFORMATION CONTACT: RICK YINGER AT 410-397-3009

Visit us at www.nationaloutdoorshow.org for complete rules and registration forms

PRE-REGISTRATION FORM

RABBIT/TRAP SHOOT

_____ **ADULT**
(18 YOA +)

_____ **YOUTH**
(12 TO 17 YOA
BY 10/10/10)

\$35.00 FEE PER PERSON—MAKE CHECK PAYABLE TO NATIONAL OUTDOOR SHOW & MUST BE POSTMARKED BY SEPTEMBER 20, 2010. MAIL TO “NATIONAL OUTDOOR SHOW”, P. O. BOX 143, CHURCH CREEK, MD 21622

NAME: _____

ADDRESS: _____

CITY: _____

STATE: _____ ZIP: _____

PHONE # _____

- **ADULT CLASS MUST USE 12 GAUGE**
- **YOUTH CLASS – PLEASE CHECK ONE**

_____ **12 GAUGE** **OR** _____ **20 GAUGE**

***ALL YOUTH PARTICIPANTS MUST BE ACCOMPANIED BY AN ADULT, MUST PRESENT HUNTER SAFETY CERTIFICATE THE DAY OF THE EVENT ALONG WITH SIGNED LIABILITY RELEASE FORM.**

***ALL ADULT PARTICIPANTS MUST PRESENT A SIGNED LIABILITY RELEASE FORM.**



P.O. BOX 143, CHURCH CREEK, MD 21622

RABBIT/TRAP SHOOT LIABILITY RELEASE FORM

SUNDAY, OCTOBER 10, 2010
CHECK-IN STARTS AT 8:30 A.M.
RABBIT/TRAP SHOOT STARTS AT 9:30 A.M.

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE #: _____

IN CONSIDERATION OF YOUR ACCEPTING MY ENTRY IN THE NATIONAL OUTDOOR SHOW RABBIT/TRAP SHOOT, I HEREBY WAIVE, RELEASE & DISCHARGE THE NATIONAL OUTDOOR SHOW AND ANY SPONSORS FOR ANY AND ALL LIABILITY ARISING FROM INJURY, ILLNESS AND DAMAGES I MAY INCUR AS A CONSEQUENCE OF PARTICIPATING IN THIS EVENT. I AUTHORIZE THE SPONSORS OF THE EVENT TO USE MY NAME AND PICTURES OF ME WITHOUT OBLIGATIONS OR LIABILITY TO ME. THIS RELEASE AND WAIVER OF LIABILITY ALSO SHALL BE BINDING ON MY HEIRS, EXECUTORS AND ADMINISTRATORS. MY PARTICIPATION IN THIS EVENT IS PURELY VOLUNTARY. BY SIGNING THIS FORM, YOU ACKNOWLEDGE REVIEW OF "SAFETY RULES" PROVIDED ON THIS WEB SITE.

PARTICIPANTS SIGNATURE: _____ DATE: _____

PARENT/GUARDIAN SIGNATURE: _____
(YOUTH ONLY)



P.O. BOX 143, CHURCH CREEK, MD 21622

SAFETY RULES

1. ALL GUNS TO BE INSPECTED UPON ARRIVAL BEFORE EVENT BEGINS FOR EVERYONES SAFETY.
2. ALL GUNS MUST BE KEPT UNLOADED WITH ACTION OPEN AT ALL TIMES.
3. NO ALCOHOLIC BEVERAGES PRIOR TO OR DURING SHOOTING EVENT.
4. PARTICIPANT MUST SUPPLY EAR & EYE PROTECTION. THIS IS REQUIRED FOR ALL SHOOTERS & PERSONNEL ON THE FIELD.
5. NO MORE THAN ONE SHELL MAY BE LOADED AT ANY TIME.
6. LOAD GUNS ONLY WHEN ON THE SHOOTING STATION AND READY TO SHOOT.
7. GUNS MUST BE UNLOADED AND ACTION OPEN BEFORE LEAVING STATION.
8. ENTRY NUMBER MUST BE DISPLAYED & VISABLE ON BACK OF SHOOTER
9. JUDGES DECISIONS ARE FINAL.