Last Date 7th September 2015

3rd North East Zone Shooting Championship

IMPHAL – 2015

ENTRY FORM

Name of State Association / Unit \_\_\_\_\_\_\_\_\_\_ Name of Manager \_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  SL. NO.  | COMP.NO | NAME OF THE SHOOTERS | DATE OF BIRTH/SHOOTER ID NO. | MATCH NOS. | DETAILS OF MQS ATTAINED(COMPETITION AND SCORE) | ENTRY FEE |
| 1. |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |
| 4. |  |  |  |  |  |  |
| 5. |  |  |  |  |  |  |
| 6. |  |  |  |  |  |  |
| 7. |  |  |  |  |  |  |
| 8. |  |  |  |  |  |  |
| 9. |  |  |  |  |  |  |
| 10. |  |  |  |  |  |  |

Date:

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

President/Secretary S.R.A./Unit