

Montana State's 115th Annual Trap Shooting Tournament Pre-Squad Form

This form and a non-refundable \$10.00 deposit must be received by June 29, 2009 to be considered. Make checks payable to Billings Trap Club. Deposits will be applied to entry fees. In order to keep short squads to a minimum, any pre-squad entry that does not enter the first event pre-squadded for will be considered a *No-Show*. Their squad and post will be released. They will forfeit their \$10.00 deposit and then must re-squad.

This form will be the only method to pre-squad. No Phone calls or e-mails are accepted. Partial or full squads must be mailed in the same envelope. If you mail more than one form in the same envelope and do not want to shoot together, please state so.

Name: _____

Address: _____

City: _____

State: _____ Zip: _____

ATA#: _____ Yardage: _____

Approximate Starting Squad Preferred: _____

Preferred Post _____ OR _____

Squad me for all events. If you are not shooting all events, please mark the events below which you wish to be squadded.

Wednesday	Thursday	Friday	Saturday	Sunday
<input type="checkbox"/> Event 1	<input type="checkbox"/> Event 4	<input type="checkbox"/> Event 7	<input type="checkbox"/> Event 10	<input type="checkbox"/> Event 13
<input type="checkbox"/> Event 2	<input type="checkbox"/> Event 5	<input type="checkbox"/> Event 8	<input type="checkbox"/> Event 11	<input type="checkbox"/> Event 14
<input type="checkbox"/> Event 3	<input type="checkbox"/> Event 6	<input type="checkbox"/> Event 9	<input type="checkbox"/> Event 12	

This form must be received by June 29, 2009

Mail this form to:

D n D Cashiering
2616 Central Ave
Great Falls, MT 59401
e-mail: ric3677@bresnan.net