

# ERIE CRAWFORD TRAP LEAGUE SIGN-UPS

DATE: \_\_\_\_\_ PRINT NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Phone # \_\_\_\_\_

**CLUB:**            **AL**    **BC**    **ED**    **ES**    **GC**    **NE**    **SA**    **SP**

|                  |      |                    |                |                     |                   |                            |
|------------------|------|--------------------|----------------|---------------------|-------------------|----------------------------|
| <b>CATEGORY:</b> | LADY | SUB-VET<br>(62-67) | VET<br>(68-73) | SR-VET<br>(74 & UP) | JUNIOR<br>(16-18) | SUB-JUNIOR<br>(15 & UNDER) |
|------------------|------|--------------------|----------------|---------------------|-------------------|----------------------------|

SELECT ONLY **ONE CATEGORY** AND IT MUST BE SELECTED PRIOR TO FIRING YOUR FIRST SHOT. NO LATE CHANGES WILL BE ACCEPTED.

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