

Tennessee Junior Olympic Championship

Individual Registration Form

Trap _____ OR Skeet _____

Need separate forms if shooting both

USA Shooting Membership # _____

(All USA Shooting Memberships should be renewed prior to the event)

Athletes Name _____

USAS Division J1 ____ J2 ____ J3 ____

(circle one) Male Female

Age _____ Date of Birth _____

Address _____

City _____ State _____ Zip _____

Phone Number (____) - _____

Parent's E-mail Address: _____

Athlete E-mail Address: _____

Event Registration Trap or Skeet: \$85 per event:

TOTAL \$ _____

Please make checks payable to VISSTA:

Registration forms & payments may be mailed to:

ATTN: TNJO
1608 Solitude Ct
Spring Hill, TN 37174

Must be received by April 15th, 2017