

2010 TCSA Korean War Memorial Service Rifle Match
Pre-registration Form

NAME _____

ADDRESS _____

STATE _____ ZIP _____ NRA CLASSIFICATION _____
NRA# _____

Rifle Type, check one: _____ AR-15 _____ M1A _____ M1 Garand

EMAIL Address _____

Check one:

DAY(S) COMPETING: SAT(\$25) _____ SUN(\$25) _____ BOTH(\$50) _____

AM'T ENCLOSED: \$ _____

Please make checks payable to "High Power"
Clip form & mail to:

John Julian
1101 Bridle Dr.
Richland, WA 99352

Phone: 509 627-4885