

CANADIAN NATIONALS REGISTRATION FORM

NAME _____

ADDRESS _____

Phone and email _____

I hereby certify I am a member in good standing of Bench rest shooters Canada and hereby release BRSC and Rosebud Club of all liability

Signed _____ Date _____

I will require _____ supper tickets at 10.00 ea.

Caliber _____ Action _____ Scope _____ Power _____

Barrelmaker _____ Twist _____ Wgt. _____

Gunsmith _____ Stocker _____

Case _____ Powder _____ Wgt. _____ Bullet _____ Wgt. _____

Primer _____ Rest _____

Classes entered (please circle the classes you would like to enter)

L.V. 100 H.V. 100 H.V. 200 L.V. 200