



2010 AR AIM State Championship

REGISTRATION FORM

MANDATORY PRE-REGISTRATION

Shoot Date: 06/15/2010

ATA Region: Southwest

Shoot Information

Team Name: _____

School/Club/Other Affiliation: _____

Shoot Location (Club Name): Remington Gun Club - 501-676-2677

Gun Club Location: From Little Rock; take I-40 East 18 miles; Exit 169; 1 mile South; gun club on right

Location City/State: Lonoke, AR - 2592 AR Hwy 15 North - Lat. 34.786021 Lng. -91.994739

Coach Information (or Parent Information for Individual)

Coach's Name: _____ Coach's Contact Number: _____

Coach's Address: _____

Coach's City: _____ State: _____ Zip: _____

Coach's Email: _____

Other Information

- The AR AIM State Championship is administered by a third party • See accompanying program for state shoot details •
- Pre-Registration paperwork must be complete and accurate at the time of submission • All ATA, AIM, & ASTF (state) memberships must be paid in full prior to registration, no exceptions! • 300 ATA registered targets required prior to 06/15/10 to shoot penalty-free • Squad as a Team or Individual • Squad teams in shooting order with Post #1 as Team Captain •
- 100-bird event • Cost of shoot: \$30 • Furnish own ammunition • Ammunition available at RGC • Cash or check only •

CATEGORY:

Age 11 & Under Pre-Sub
 Age 12-14 Sub-Junior
 Age 15-18 Junior
 Age 18-23 Grad / Collegiate

AIM CLASS: PRE-SUB

Class A: 100-80%
 Class B: 70% & under 80%
 Class C: 60% & under 70%
 Class D: under 60%

AIM CLASS: SUB-JUNIOR

Class A: 100-90%
 Class B: 80% & under 90%
 Class C: 70% & under 80%
 Class D: under 70%

AIM CLASS: JUNIOR GRAD. & COLLEGIATE

Class A: 100-95%
 Class B: 91% & under 95%
 Class C: 80% & under 91%
 Class D: under 80%

Shooter Information

EXPERIENCED "ATA" SHOOTERS: Determine AIM Class "A", "B", "C" or "D" above based on ATA average. **BRAND NEW "ATA" SHOOTERS:** Disregard Class and list in "Average" below the number of targets broken out of a practice round of 25. *Example: 16*

POST #1

___ TEAM *or* ___ INDIVIDUAL *(please check one)* DOB: ___/___/___ Category: _____ Average: ___ Class: ___

*ATA#: _____ First Name: _____ Last Name: _____

POST #2

___ TEAM *or* ___ INDIVIDUAL *(please check one)* DOB: ___/___/___ Category: _____ Average: ___ Class: ___

*ATA#: _____ First Name: _____ Last Name: _____

POST #3

___ TEAM *or* ___ INDIVIDUAL *(please check one)* DOB: ___/___/___ Category: _____ Average: ___ Class: ___

*ATA#: _____ First Name: _____ Last Name: _____

POST #4

___ TEAM *or* ___ INDIVIDUAL *(please check one)* DOB: ___/___/___ Category: _____ Average: ___ Class: ___

*ATA#: _____ First Name: _____ Last Name: _____

POST #5

___ TEAM *or* ___ INDIVIDUAL *(please check one)* DOB: ___/___/___ Category: _____ Average: ___ Class: ___

*ATA#: _____ First Name: _____ Last Name: _____

■ PLEASE PRINT FORM(S) ■ [SCAN & EMAIL](#) completed forms by [SATURDAY, JUNE 12th](#) to: peteyc@cebridge.net *OR* [US MAIL](#) by [THURSDAY, JUNE 10th](#) TO: [AIM Registration, C/O Petey Chambless, 61 Vestal Drive, Lonoke, AR 72086](#)

Questions: Contact Petey or Renae Chambless at 501-676-3255 (home) - after 5:00 p.m.