NMLRA National Youth Shoot Registration Form

Please complete one registration form per child. Make as many copies as you need.

First Name | Last Name

Street Address | City | State | Zip

Home Phone | Email Address

Date of Birth | Age

Name of Parent/Responsible Party | Phone Number of Parent/Responsible Party

Participant Gender ❑ Male ❑ Female

FREE CAMPING - ELECTRIC ONLY SITE
****EXCLUDES FULL HOOK-UP SITES***

Registration Fee is $30.00 per child

Method of Payment: _____ Check (make payable to NMLRA)

_____ Discover _____ MasterCard

_____Visa _____Am Exp

❑ Yes ❑ No

Would you like to volunteer to help at this year's shoot?

Credit Card Number:_____

Expiration Date:_____V-Code:_____

Name On Card:_____

Signature:_____

Return completed form and payment to:
NMLRA, Attn: Youth Shoots
P.O. Box 67 • Friendship, IN 47021 For more information call 812-432-2670
or email: lbrown@nmlra.org