

2010 Ole Mill NRA Sectional

Dear Shooters;

Georgia Competitive Shooters, Inc. is proud to be a part of the 2010 NRA National Disabled Indoor Sectional Championships and we would like to invite you to participate in the ***2010 Ole Mill NRA Sectional***.

The event will be *March 6 and 7*.

Schedule

March 6

9 - 11AM

Adaptive Shooting Clinic

March 7

12:00 PM

International and Air Pistol Relays

2:30 PM

3P Relay

Awards Presentation following matches

Please forward the attached registration form and payment of \$30 per athlete (plus \$20 per team) by March 1 to the following address:

*Spalding County Shooting Sports
Attn: Carol Gulliford
PO Box 277
Griffin, GA 30224*

Hotel Information

Comfort Inn Days Inn

2014 N. Expressway
Griffin, GA 30223
770-229-6001
1-800-4Choice

Super 8 Motel

2010 N. Expressway
Griffin, GA 30223
770-228-1393

Howard Inn & Suites Iris Inn & Suites

1690 N. Expressway
Griffin, GA 30223
770-227-2411

Days Inn

1719 N. Expressway
Griffin, GA 30223
770-229-9797

Iris Inn & Suites

1906 N. Expressway
Griffin, GA 30223
770-233-4747

Please contact Carol Gulliford with any questions or concerns at uge2255@uga.edu or 770-467-4225.

We look forward to seeing you.

Sincerely,

Jesse Phillips

2010 Ole Mill NRA Sectional

Match Director

Volunteers are welcome and appreciated!

2010 Ole Mill NRA Sectional

(Mr./Mrs./Ms.) _____

First Name _____ **Middle Initial** _____ **Last Name** _____

Date of Birth (M/D/Y) _____ **Age** _____ **Sex** _____ Male _____ Female _____

Street Address _____

City _____ **State** _____ **Zip Code** _____

Telephone Number (Main) _____

Shooting Classification: SH1 Rifle _____ SH2 Rifle _____ Pistol _____

Left-handed _____ **Right-handed** _____

| | | | | |
|--|--|------------|--|-----------|
| Are you also registering as part of a team? | | Yes | | No |
| Team Name | | | | |

Audio Visual Consent: I hereby consent and authorize the taking of photographs, movies, films, videotapes, tape recordings, or reproductions (collectively, "Reproductions") of the persons who are hereby applying for membership (the "Applicants") and consent to use, copyright, license, publication or broadcast of the same for advertising, educational, promotional, or publicity purposes on the part of *Georgia Competitive Shooters, Inc* and by its affiliated and associated organizations, including its directors, officers, agents, servants and employees. I hereby grant and assign to *Georgia Competitive Shooters, Inc* the right, title, and irrevocable authority and interest to such Reproductions. I waive any and all claims for compensation and waive any and all claims related to or arising out of the publication and dissemination of the same of any lawful purposes. I further authorize the communication of information concerning the undersigned in connection with the utilization of such Reproductions by *Georgia Competitive Shooters, Inc*, its affiliated or associated organizations, and their respective directors, trustees, officers, agents, servants and employees without claim for compensation and waive all claims related to or arising out of the publication and dissemination of the same. (initial) _____

Consent for Emergency Treatment: I hereby give permission for the Participant to participate as a *Georgia Competitive Shooters, Inc* participant/volunteer. In the event that the Participant should sustain any injuries while participating in a *Georgia Competitive Shooters, Inc* activity or while on the premises of *Georgia Competitive Shooters, Inc*, I understand that the Participant may be examined and treated for emergency injuries by health care personnel, including examinations at medical facilities. In voluntarily consenting to such examination and treatment for the *Georgia Competitive Shooters, Inc*, its directors, officers, staff, employees, contracted employees, agents and volunteers from any actions, suits, damages, claims, or judgements that may result from such examination and treatment. (initial) _____

Release and Indemnification: I hereby release and discharge *Georgia Competitive Shooters, Inc* and all affiliated and associated organizations, together with their respective trustees, directors, officers, employees, and agents, of and from any and all demands, claims, causes of action, suits, damages, judgments, or liabilities of any kind or nature whatsoever, arising out of or in any way related to the Participant's participation in a *Georgia Competitive Shooters, Inc* activity, including any personal injury or death, which he/she may suffer or incur as a result of participation in such program, whether or not caused by the negligence or wrongful acts of such persons or any agents, servants or employees of any of them. This release shall be binding upon the heirs, next of kin, guardians, executors, and administrators of the Participant. I do further agree to indemnify and hold harmless each of them, of and from any and all claims, demands or actions of any kind or nature whatsoever arising out of any injury of damages incurred by the Participant. In signing this release, I acknowledge and represent that I am over 19 years of age, I am of sound mind, I have read this release, understand it, and sign it voluntarily, and that this release contains the entire agreement between myself and *Georgia Competitive Shooters, Inc*. (initial) _____

I have read, understood, and completed this questionnaire. Any questions that I had were answered to my full satisfaction.

Signature Participant

Date

Signature (Parent / Guardian if under 18)

Witness

Volunteers are welcome and appreciated!