

# NRA NATIONAL RECORD REPORTING FORM

Statistical Officers, NRA Referees or Jury Chairmen are to complete this form and forward to NRA immediately following each registered tournament.

_____	_____	_____
Name of Tournament	Location	Date
<input type="checkbox"/> No records established at this tournament.	Certified by: _____	
	Referee or Jury Chairman Signature	
Statistical Director: _____	_____	_____
(Print name)	(Signature)	
_____	_____	_____
Street Address	City & State	Zip

In order that new National Records may be recognized promptly, tournament sponsors must send a final result bulletin with this record sheet. List all scores fired at your Registered tournament that equal or exceed the Records. For team national records, please attach list of each team member (full name and address) and their individual score. **NOTE: Request for Smallbore Rifle records MUST include fired targets. See SBR Rule 17.3**

### (PLEASE PRINT OR TYPE ALL INFORMATION)

Competitor/Team Name: \_\_\_\_\_  
Street: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_  
NRA Member ID number (if team record, NRA club or organization number): \_\_\_\_\_  
Course of fire: \_\_\_\_\_ Existing Record: \_\_\_\_\_  
Match #: \_\_\_\_\_ National Record Rule Concerned (Sec 17): \_\_\_\_\_ Score: \_\_\_\_\_

#### INDOOR

#### OUTDOOR

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Smallbore Rifle | <input type="checkbox"/> High Power Rifle            | <input type="checkbox"/> Black Powder Target Rifle   |
| <input type="checkbox"/> Pistol          | <input type="checkbox"/> High Power Long Range       | <input type="checkbox"/> Action Pistol ( <input type="checkbox"/> Metallic <input type="checkbox"/> Optical) |
| <input type="checkbox"/> BB Gun/Air Gun  | <input type="checkbox"/> Intl Fullbore Prone         | <input type="checkbox"/> NRA Mid-Range Prone   |
| <input type="checkbox"/> Police Combat   | <input type="checkbox"/> F-Class Open Rifle (3.4(a)) | <input type="checkbox"/> F-Class Target Rifle (3.4(b))   |

#### National Record Category (check all that apply)

- |                                      |                                   |                                       |                                  |                                  |  |
|--------------------------------------|-----------------------------------|---------------------------------------|----------------------------------|----------------------------------|--|
| <input type="checkbox"/> Open        | <input type="checkbox"/> Civilian | <input type="checkbox"/> Police       | <input type="checkbox"/> Women   | <input type="checkbox"/> Junior* | <input type="checkbox"/> Intermediate Junior*  |
| <input type="checkbox"/> Sub-Junior* | <input type="checkbox"/> Senior   | <input type="checkbox"/> Grand Senior | <input type="checkbox"/> Service | <input type="checkbox"/> Reserve | <input type="checkbox"/> Other (if not listed) |

\* Date of Birth (required for Junior records): \_\_\_\_\_

List Team Members name, address, and score below.(if Service, Reserve, etc., include rank):

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

(See back for additional record)  
(Copies of this form may be made if additional records need to be reported.)