



## **2012 Post-Instructional Shooting Clinic Report**

***Please return to NRA no later than 1 week after your event. Material for multiple clinics throughout the year will not be shipped until each previous clinic is closed.***

Date of Clinic: \_\_\_\_\_

Date of Report: \_\_\_\_\_

Clinic Director \_\_\_\_\_

Clinic Director's address \_\_\_\_\_

City State Zip \_\_\_\_\_

Clinic Director's phone number with area code \_\_\_\_\_

Host Organization \_\_\_\_\_

Number of women who participated \_\_\_\_\_ Number of souvenir bags ordered \_\_\_\_\_

Number of volunteers (include instructors, coaches, helpers) \_\_\_\_\_

Did you receive an NRA Foundation Grant for this event? \_\_\_\_\_

*Please check to make sure you have included the following with your report:*

\_\_\_\_\_ **Names/addresses/emails of all participants and volunteers (a blank formatted Excel document is available)**

\_\_\_\_\_ **Photographs and Photographic Release form signed by participants and volunteers (Note: You must include at least six high resolution photos on CD.)**

\_\_\_\_\_ **Local media articles/announcements about the event (if any). Please include name and date of media source.**

Please include a comment about your clinic that we may use in various NRA Publications, including magazines, newsletters, reports, web sites, or in press releases.

---

---

---

**Thank you! Your work as a Clinic Director is very much appreciated!**

***This is a new interactive form and can be completed right in Acrobat Reader. Simply enter your information and save to your computer.***

**Attach it to an Email to:**

[Womenontargetclinics@nrahq.org](mailto:Womenontargetclinics@nrahq.org)

**OR**

**Mail to:** National Rifle Association  
Women On Target® ISC National Coordinator  
11250 Waples Mill Road  
Fairfax, VA 22030  
Phone 703-267-1398  
FAX 703-267-3898