Missouri State Team Application

Team Category: _____ Men, Ladies, Veteran, Sr. Veteran, Junior, Sub-Junior

NAME_____ATA #_____Date of Birth_____

Phone #_____Email address_____

Mailing address:_____
Street City State Zip

Place and date you shot at a Missouri Zone Shoot_____

Championship events you shot during Missouri State Shoot_____

Did you change Category during target year? Yes_____ No_____

If you changed category during target year, state new category_____and date of change_____

What category did you classify at Missouri State Shoot_____

	Number of Targets Shot	Average
Singles		
Handicap		
Doubles		
Total Targets		

STATE TEAM TARGET REQUIREMENTS

	MEN	LADIES	JR/SUB JR	VETERAN	SR VET
SINGLES	2,000	1,200	1,000	1,500	1,200
HANDICAP	1,500	1,000	1,000	1,200	1,000
DOUBLES	1,000	500	500	800	500

MAIL COMPLETED FORM TO: Missouri Trapshooters Association
51 Trapshooters Road
Linn Creek, Missouri 65052

OR Email completed form to: motraps@gmail.com

APPLICATION MUST BE RECEIVED AT MTA NOT LATER THAN NOVEMBER 1.