

Bullmasters Shooting Sports Match March 8, 2025 Registration Form



County/District		Coordinator Name:					
Address:	Phone:		Email:				
NAME	4-H Age (by 1/1/25)	Date of Birth (mm/dd/yy)	BB Gun **	AIR RIFLE **	AIR PISTOL **	Total Fees \$12 per discipline per shooter	

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Sub-Total = \$ _____

Total Fees Due = \$ _____

MAKE CHECKS PAYABLE TO: Bullmasters 4-H Shooting Sports

Bullmasters 4-H Shooting Sports

PO Box 204

ENTRY FORMS AND FEES ARE DUE BY FEBRUARY 28, 2025 TO:

		Holton, KS 66436
	QUESTIONS:	Lisa Cronkhite Phone: 785-851-0498
		Email: <u>bullmastersshootingsports@yahoo.com</u>
County Coordinator and Ext. Agent Signature To verify that 4-H members are enrolled and active on 4H		
Instructor(s) Signature (for all disciplines competing in To verify all youth are currently enrolled in the respect	n)tive discipline and have com	pleted the basic course for that discipline.
Special Requests:		
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