TO THE MINNESOTA TRAPSHOOTING ASSOCIATION PO BOX 292 BUFFALO, MN 55313

At the registered competition of the At the registered competition of the (Name of Club) (Name of Club) held at _____ on regularly qualified contestants paid the MTA daily fee of held at _____ on ___ regularly qualified contestants paid the MTA daily fee of \$3.00 as follows: \$3.00 as follows: 1st Day Entries @ \$3.00 each 2nd Day Entries @ \$3.00 each 3rd Day Entries @ \$3.00 each 4th Day Entries @ \$3.00 each 5th Day Entries @ \$3.00 each 1st Day _____ Entries @ \$3.00 each 2nd Day Entries @ \$3.00 each 3rd Day Entries @ \$3.00 each 4th Day Entries @ \$3.00 each 5th Day Entries @ \$3.00 each **TOTAL MTA DAILY FEES TOTAL MTA DAILY FEES** Secretary, Cashier or Treasurer Secretary, Cashier or Treasurer Address Address NEW adult shooter rebate: Nmbr of Shooters x\$10 = NEW adult shooter rebate: Nmbr of Shooters x\$10 = NEW JR/SBJR shooter rebate: Nmbr of Shooters___x\$12=____ NEW JR/SBJR shooter rebate: Nmbr of Shooters___x\$12=____ After completion of the schedule event, return the following After completion of the schedule event, return the following information to the MTA (address listed above): information to the MTA (address listed above): - This completed form - This completed form - Pink copy of the ATA Registered Scores form; OR - Pink copy of the ATA Registered Scores form; OR - ATA data report created by PC program - ATA data report created by PC program

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