

EASTERN CONNECTICUT SKEET CLUB
2015-2016 TEAM ROSTER APPLICATION

CLUB: _____ PHONE() _____
MAIL ADDRESS: _____ CITY ST: _____ ZIP: _____

TEAM NAME: _____ Team Avg Total* _____

CAPTAIN: _____ PHONE:() _____

ADDRESS: _____ CITY, ST: _____ ZIP: _____

EMAIL ADDRESS _____ DATE OF BIRTH _____

SHOOT LAST YEAR: YES ___ NO ___ IF YES, DIV: _____ TEAM: _____ AVG _____

NAME: _____ PHONE:() _____

ADDRESS: _____ CITY, ST: _____ ZIP: _____

EMAIL ADDRESS _____ DATE OF BIRTH _____

SHOOT LAST YEAR: YES ___ NO ___ IF YES, DIV: _____ TEAM: _____ AVG _____

NAME: _____ PHONE:() _____

ADDRESS: _____ CITY, ST: _____ ZIP: _____

EMAIL ADDRESS _____ DATE OF BIRTH _____

SHOOT LAST YEAR: YES ___ NO ___ IF YES, DIV: _____ TEAM: _____ AVG _____

NAME: _____ PHONE:() _____

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EMAIL ADDRESS _____ DATE OF BIRTH _____

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ADDRESS: _____ CITY, ST: _____ ZIP: _____

EMAIL ADDRESS _____ DATE OF BIRTH _____

SHOOT LAST YEAR: YES ___ NO ___ IF YES, DIV: _____ TEAM: _____ AVG _____

*TOTAL of top five shooters. See Section 1, Paragraph F of the Shooting Rules available at: www.ecsc-skeet.com.