

PENNSYLVANIA STATE CORRECTIONS OFFICERS ASSOCIATION
FIRST ANNUAL SPORTING CLAYS TOURNAMENT: MAY 20, 2014
TO BENEFIT THE **BOBBY WILT FOUNDATION**

TEAM REGISTRATION FORM

Local/Company Sponsor (if applicable): _____

Team Captain's Name: _____

Phone Number (required): _____

Email: _____

TEAM MEMBERS: *(please print first and last name CLEARLY with the correct spelling)*

1. Name: _____

2. Name: _____

3. Name: _____

4. Name: _____

*\$100 per shooter or \$400 per team registration. Payments must be submitted with this form before the event.
If you need to be placed on a team or need additional team members, please complete the information above and team assignments will be made.

**ALL REGISTRATION FORMS ALONG WITH PAYMENTS
MUST BE POSTMARKED BY MAY 12TH!**

**ALL CHECKS AND MONEY ORDERS SHOULD BE MADE PAYABLE TO:
PSCOA SPORTING CLAYS TOURNAMENT**

**CASH, CHECKS OR MONEY ORDERS ALONG WITH THIS REGISTRATION FORM
SHOULD BE SUBMITTED TO PSCOA HEADQUARTERS:
ATTN: BWF SPORTING CLAYS TOURNAMENT
2421 NORTH FRONT STREET | HARRISBURG, PA 17110**

FOR OFFICIAL USE ONLY	
RECEIVED BY:	
DATE:	
PAYMENT NOTES:	