

APPLICATION "50" PIN - NYSMLA

Date of Match _____

Name of Club _____

Name and Address of Competitor _____

Distance at which the target was posted _____

Signature of Witness _____

Signature of Club Officer _____

**Send all required information and application to the
Shoot Director for processing.**

NYSMLA SHOOT DIRECTOR:

JAMES W. CURRIER,
291 County Rt. 6,
Phoenix, NY 13135