



# Sporter Airsoft Rifle

## Skill Building Clinic (6 SLOTS ONLY)



Ages 8-17 (CO-ED)  
 (Non-refundable \$125 Donation)  
 Fair Market Value: (\$200)

Payment & Registration form must be sent to Shoot Right ASAP

**LOCATION: COACH POTTER'S PRIVATE AIR RANGE  
 5029 E. CAMBRIDGE AVE. 85008 PHX, AZ.**

### 2018 Clinic Dates:

May 1, 8, 20, 22, 29, June 2, 5 and 12

**Times:** Tuesday nights - 630pm to 830pm and Saturday days - 800am to 10am

The shooter must be able to hold the rifle in standing position up to 40 seconds without putting it down.

If shooter misses a scheduled clinic, make-ups must be done in June either before the Tuesday or after the Saturday scheduled clinic times.

**Skill Levels:**

Basic Practical, Pro-Marksman, Marksman, Marksman 1st Class, Sharpshooter, Expert, Distinguished Expert. All skills may not be reached Basic is the only requirement skill to pass.

**Target Distances and Score:**

Shoot ten shots each at six TQ-5 Targets, 25 feet for a total of 60 shots. You must score 240 out of a possible 600 Basic Practical

Questions? Contact Shoot Right - 602.288.5324  
info@shootrightaz.org www.shootrightaz.org

Shoot Right is a division of Child And Adult Safety Education Services, Inc. (CAASES), a 501(c)3 non-profit org. *The amount of the contribution that is deductible for federal income tax purposes is limited to the excess of your contribution over the fair market value of the goods or services provided by Shoot Right / CAASES. (EIN #20-3748692)*

**Return Bottom Portion. Mail To: Shoot Right, 2302 N. 44th St. Suite 14-1514 PHX, AZ 85008**

Date Completed \_\_\_\_\_

Name	
Birth date & Age	
Parent/Guardian Name	
Street Address	
City ST ZIP Code	
Phone	
E-Mail Address	

**Payment**

**Total Due: \$125**

Date Payment Received: \_\_\_\_\_ add 3% for credit cards

**Cash** \_\_\_\_\_

Check \_\_\_\_\_ (made out to Shoot Right). Check # \_\_\_\_\_

Credit Card \_\_\_\_\_

Name on CC \_\_\_\_\_

MC \_\_\_\_\_ Visa \_\_\_\_\_

CC# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

AmEx \_\_\_\_\_ Disc \_\_\_\_\_

CC Exp. Date \_\_\_\_\_ - \_\_\_\_\_ CSC # \_\_\_\_\_

CC Auth. Signature \_\_\_\_\_



