

NATIONAL MARINE CORPS LEAGUE POSTAL PISTOL MATCH

SHOOTER / TEAM - SERVICE/OPEN/.22 CAL MATCH

DETACHMENT/UNIT: _____ DATE: _____

TEAM CAPTAIN: _____ PHONE: _____

ADDRESS: _____
(STREET) (CITY) (STATE) (ZIP)

TEAM E-MAIL ADDRESS: _____

COLUMN #1 PRINT FULL NAME...(NO NICKNAMES PERMITTED) (LAST, FIRST MI)

COLUMN #2 MCL MEMBERSHIP NUMBER *

COLUMN #3 1911A1, 9MM, GLOCK 19 or .38 CALIBER REVOLVER FOR SERVICE MATCH

ANY CENTER FIRE PISTOL UP TO .50 CALIBER FOR OPEN MATCH

.22 CAL FOR .22 CALIBER MATCH (.22 CALIBER RIMFIRE ONLY)

COLUMN #4 MARK "X" IF 1ST TIME SHOOTER

COLUMN #5 INDIVIDUAL SHOOTER E-MAIL ADDRESS



TEAM A 1 2 3 4 5

1					
2					
3					
4					
5					

TEAM B 1 2 3 4 5

1					
2					
3					
4					
5					

TEAM C 1 2 3 4 5

1					
2					
3					
4					
5					

TEAM D 1 2 3 4 5

1					
2					
3					
4					
5					

* If a New Member is without a Membership Number place 99999 in Column 2