



## Match Registration

Date & Match: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

LSC Member: Yes / No

Adult: Yes / No

Junior: Yes / No

Need Club Rifle: Yes / No

Type of Rifle: As Issued \_\_\_\_\_, NM \_\_\_\_\_, Other \_\_\_\_\_

How did you know about our match? \_\_\_\_\_

**For valuable consideration received, I hereby grant to Linden Sportsmen Club and their legal representatives and assigns, the irrevocable and unrestricted right to use and publish photographs of me, or in which I may be included, for editorial, trade, advertising, and any other purpose and in any manner and medium; to alter the same without restriction; and to copyright the same. I hereby release Linden Sportsmen Club and his/her legal representatives and assigns from all claims and liability relating to said photographs.**

X: \_\_\_\_\_

**Mail to: Linden Sportsmen Club  
Civilian Marksmanship Program  
Po Box 384  
Linden Mi 48451**