

SINGAPORE OPEN SHOOTING CHAMPIONSHIPS
25 July – 02 August 2009

Email: operations@singaporeshooting.org or Fax: (65) 6795 6182

IPSC EVENTS FINAL ENTRY (Form A6)
Please return by 15th May 2009

IPSC Club _____ Shooter No. _____

Name _____
 Family Name First Name Nickname

Date of Birth: _____

Contact _____

Address: _____

City/Town: _____ Postal Code _____

State/Province: _____ Country _____

Telephone No.: _____ Fax _____

Email Address: _____

Passport Details: Issuing Country _____

Passport No. _____

Expiry Date _____

FIREARM DETAILS	
Type (Pistol, Revolver, etc)	
Make (manufacture)	
Caliber	
Serial Number	

CONTEST DIVISION : (Please mark "x" all appropriate box)
 Open Standard Production Revolver Standard

CATEGORY : (Please mark "x" all appropriate box)
 Junior Individual Senior Super Senior
 Ladies Range Officer Team

POWER FACTOR
 Major Minor

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All competitors are responsible for the shots fired by them. They shall not make any claims from the competition organizers and/or any related association. All competitors are responsible for providing their own insurance.

COMPETITOR'S signature

Enquiries: IPSC Singapore
matthew.lee.cw@gmail.com
(65) 9638 5138

Remarks: Each organization is only allowed to send 5 representatives due to time & space constraint. We apologize for the inconvenience caused.