

# Scarborough Fish & Game IDPA

## Introduction To IDPA Pistol Shooting Clinic

### Registration Form

Please Print Clearly

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

IDPA Member: Yes \_\_\_\_\_ No \_\_\_\_\_ If Yes IDPA# \_\_\_\_\_

Date of clinic you wish to attend: \_\_\_\_\_

Cost: \$100.00

Please mail this form along with your **non-refundable (if you are a no-show for the clinic)** registration fee of \$100.00 to the address below. **You will not be considered registered for a clinic until your registration form and payment are received.**

Make checks out to: Scarborough Fish & Game IDPA

Mail registration form & payment to:

Scarborough F&G IDPA Discipline Treasurer

C/O Kristine Poulin 58 Church Rd Readfield, ME. 04355