English Small-bore Shooting Union Open and Confined Championships 5th – 7th May 2018 ENTRY FORM

Competitor Number						
Admin Use						

Name							
Address							
Telephoi	ne No(s)			Pos	tcode:		
E-mail address					(PRINT legibly)		
Importan	Birth: AND: Home Country eligibing the cause the database uses your unique ID number is composed automatically from this information.	nber for identific	ation purposes. This is sin	nilar to t	he ISSF ID	system.	
ESSU M	ember: YES / NO Membership Number:	(You	ı must be a Full Member or	date of	f submitting	this form).	
	co)MPETITIO	NS				
Comp. No.	Event	Circle cho Your squado	Date / Time ice if alternative shown ding notice will show your cated start times	Tick to enter	Entry Fee	£	
1	50m Prone Rifle Men & Women mixed*	Sunday	0900, 1040, 1220		£ 30.00		
2	Three Position Rifle Men* (3 x 40)	Monday	0900		£ 33.00		
3	Air Rifle Men *	Saturday	1350		£ 26.00		
4	Three Position Rifle Women* (3 x 40)	Monday	0900		£ 33.00		
5	Air Rifle Women *	Saturday	1030		£ 26.00		
6	Air Pistol Men *	Sunday	0900		£ 26.00		
7	Air Pistol Women *	Sunday	1320		£ 26.00		
8	50m Pistol Men *	Saturday	1240		£ 26.00		
9	25m Air Sport Pistol Men	Saturday	0900		£ 26.00		
10	25m Air Sport Pistol Women	Saturday	0900		£ 26.00		
11	25m Rapid Fire Pistol * (s5 Men only)	Saturday	0830, 0940, 1050		£ 26.00		
12	25m Pistol * (s5 Women only)	Saturday	1330		£ 26.00		
13	Air Rifle Sporter Mixed	Saturday	0900		£ 20.00		
If entries are received after Saturday 21st April; Late entry fee: £ 5.00							
*Includes Final.				Total:			
ESSU Full Members discount:				-10% of Total			
Junior discount (if born after 1997):					-£ 5.00		
Remittance after discounts:							
Make yo	our BACS payment after you receive your squadd Payn						
 I agree to abide by the Rules of the ISSF, NSRA and ESSU, particularly those concerning safety. I declare that I do not currently suffer from epilepsy or sudden attacks of disabling giddiness or fainting, any mental illness or any other disability or medical condition that could affect my fitness as a shooter. If you have a medical history of any of these conditions, please supply a medical certificate or evidence that would permit us to accept your entry, as required by the Firearms Acts. I confirm that I am entitled to possess and use the type and class of firearm for the competition(s) that I enter by virtue of my membership of a Home Office approved Club, s5 authorisation or other authority. I consent to the use of the information on this form for the purpose described in the data protection notice. I consent to my name being displayed on the ESSU website results. YES \(\sqrt{NO} \) \(\sqrt{NO} \) \(\sqrt{NO} \(\sqrt{NO} \) \(\sqrt{NO} \							