

**2019 MARINE CORPS LEAGUE OF PENNSYLVANIA, INC.  
PISTOL MATCH SHOOTER / TEAM; SERVICE MATCH**

DETACHMENT / UNIT: \_\_\_\_\_ DATE: \_\_\_\_\_

TEAM CAPTAIN: \_\_\_\_\_ PHONE: ( ) \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
(STREET) (CITY) (STATE) (ZIP)

E-MAIL ADDRESS: \_\_\_\_\_

- COLUMN #1 PRINT FULL NAME...(NO NICKNAMES PERMITTED) (LAST, FIRST MI)
- COLUMN #2 LEAGUE ID NUMBER OR ACTIVE DUTY NUMBER...(LAST FOUR OF SSN)
- COLUMN #3 PISTOL / REVOLVER TO BE USED: (IF PISTOL – 1911A1 or 9mm / REVOLVER – .38 CAL)
- COLUMN #4 MARK “X” IF 1<sup>ST</sup> TIME SHOOTER
- COLUMN #5 DO NOT MARK - OFFICIAL USE ONLY

**TEAM A**

	Column 1	Column 2	Column 3	Column 4	Column 5
1					
2					
3					
4					
5					

**TEAM B**

	Column 1	Column 2	Column 3	Column 4	Column 5
1					
2					
3					
4					
5					

**TEAM C**

	Column 1	Column 2	Column 3	Column 4	Column 5
1					
2					
3					
4					
5					

**TEAM D**

	Column 1	Column 2	Column 3	Column 4	Column 5
1					
2					
3					
4					
5					

**PLEASE PRINT OR TYPE ALL INFORMATION**

WE NEED THE NUMBER OF SHOOTERS FIRING EACH CALIBER / PISTOL

Type 1911 A1:           Type 9mm:

NUMBER OF SHOOTERS NEEDING BILLETS

***PLEASE NOTE: ALL SHOOTERS MUST BE A MARINE CORPS  
LEAGUE MEMBER IN GOOD STANDING.***

ALL ENTRIES MUST BE POSTMARKED BY 18 MAY 2019

SEND (2) RELEASE FORMS, TEAM REGISTRATION FORM AND FEE OF \$30.00 FOR EACH  
PARTICIPANT MADE PAYABLE TO: **MARINE CORPS LEAGUE OF PENNSYLVANIA**  
(Please put "Pistol Match 2019" in the memo line of the check.)

TO

**Joseph Kier 2201 Rebecca Drive, Hatfield, PA 19940**

**SPECIAL REQUESTS**

PLEASE PRINT OR TYPE ALL INFORMATION

**PHYSICAL CONDITIONS**

INFORMATION IS REQUESTED FOR THOSE SHOOTERS UNDER MEDICAL CARE THAT MAY NEED MEDICAL  
TREATMENT IF THE NEED ARISES, i.e., NAME OF SHOOTER, CONDITION, MEDICATION, HANDICAP CONDITIONS  
AND NEXT OF KIN TO BE NOTIFIED INCLUDING PHONE NUMBER.

NAME \_\_\_\_\_ HOME PHONE \_\_\_\_\_