

# IBS Screamer Sticker

## Screamer Sticker Application Form

### \* Required

Name\*

E-Mail

Address 1 \*

Address 2

City \*

State - Zip \*

Country \*

Day Phone

Eve Phone \*

Best Time to Call \*

### Discipline Choices

1. Score	VFS	<input type="checkbox"/>	HUNTER	<input type="checkbox"/>	YARDS	<input type="checkbox"/>	METERS	<input type="checkbox"/>
2. Group	LG	<input type="checkbox"/>	HG	<input type="checkbox"/>	YARDS	<input type="checkbox"/>	METERS	<input type="checkbox"/>
3. 600 Yards	LG	<input type="checkbox"/>	HG	<input type="checkbox"/>	YARDS	<input type="checkbox"/>	METERS	<input type="checkbox"/>
4. 1000 Yards	LG	<input type="checkbox"/>	HG	<input type="checkbox"/>	YARDS	<input type="checkbox"/>	METERS	<input type="checkbox"/>

### Details of Qualifying Target

Date Shot	<input type="text"/>
Club	<input type="text"/>
Match #	<input type="text"/>
Relay & Bench #	<input type="text"/>
Score or Group Size	<input type="text"/>

Fill this form out in your browser and print it out. **Send only by U.S. Postal Service to:**

**Ron Mattson  
65 Smithfield Av  
Meriden, CT 06451**

**Reset Form**