PLEASE ENTER THE BELOW SHOOTERS IN THE UPCOMING CCGC SHOOT

Shoot name:			
Position #1	Name:	NSSA#	TSSA#
	Address:		
	Ph#:	_ Email:	
	Concurrent:		
	Paid on Deposit: \$ Ck#:		
Position #2	Name:	NSSA#	TSSA#
	Address:		
	Address:	Email:	
	Concurrent:		
	Paid on Deposit: \$ Ck#:		
Position #3	Name:	NSSA#	TSSA#
	Address:		
	Address:Ph#:	Email:	
	Concurrent:		
	Paid on Deposit: \$ Ck#:		
Position #4	Name:	NSSA#	TSSA#
	Address:		
	Address:Ph#:	Email:	
	Concurrent:		
	Paid on Deposit: \$ Ck#:		
Position #5	Name:	NSSA#	TSSA#
	Address:		
	Ph#:	Email:	
	Concurrent:		
	Paid on Deposit: \$ Ck#:		
	oles Rotation:1 st Choice	2 nd Choice	
Desired Mair	Rotation:1 st Choice	2 nd Choice	
Notes:			

Shooter Name	Main	Doubles		Total
			Meal	
1.	\$	\$	\$	\$
2.	\$	\$	\$	\$
3.	\$	\$	\$	\$
4.	\$	\$	\$	\$
5.	\$	\$	\$	\$