

API Father-Son & Family Sporting Clays Tournament - April 16-17, 2015

PLEASE PRINT CLEARLY

One person Registrations are welcome ! Minimum age 15 years

| TEAM CAPTAIN | Shooting Options |
|------------------------------------------------------|-------------------------------------|
| Name _____ | Main Event \$150/person _____ |
| Company _____ | Thursday Practice \$50/person _____ |
| Address _____ | 5-Stand \$20/person _____ |
| City/St/Zip _____ | 2-Man Flurry \$20/Team _____ |
| Phone _____ | Long Bird \$10/person _____ |
| E-Mail _____ | 2 Mulligans \$10/person _____ |
| Shirt Size S ___ M ___ L ___ XL ___ XXL ___ XXXL ___ | Shooter Total Cost \$ _____ |

| SHOOTER 2 | Shooting Options |
|------------------------------------------------------|-------------------------------------|
| Name _____ | Main Event \$150/person _____ |
| Company _____ | Thursday Practice \$50/person _____ |
| Address _____ | 5-Stand \$20/person _____ |
| City/St/Zip _____ | 2-Man Flurry \$20/Team _____ |
| Phone _____ | Long Bird \$10/person _____ |
| E-Mail _____ | 2 Mulligans \$10/person _____ |
| Shirt Size S ___ M ___ L ___ XL ___ XXL ___ XXXL ___ | Shooter Total Cost \$ _____ |

| SHOOTER 3 | Shooting Options |
|------------------------------------------------------|-------------------------------------|
| Name _____ | Main Event \$150/person _____ |
| Company _____ | Thursday Practice \$50/person _____ |
| Address _____ | 5-Stand \$20/person _____ |
| City/St/Zip _____ | 2-Man Flurry \$20/Team _____ |
| Phone _____ | Long Bird \$10/person _____ |
| E-Mail _____ | 2 Mulligans \$10/person _____ |
| Shirt Size S ___ M ___ L ___ XL ___ XXL ___ XXXL ___ | Shooter Total Cost \$ _____ |

| SHOOTER 4 | Shooting Options |
|------------------------------------------------------|-------------------------------------|
| Name _____ | Main Event \$150/person _____ |
| Company _____ | Thursday Practice \$50/person _____ |
| Address _____ | 5-Stand \$20/person _____ |
| City/St/Zip _____ | 2-Man Flurry \$20/Team _____ |
| Phone _____ | Long Bird \$10/person _____ |
| E-Mail _____ | 2 Mulligans \$10/person _____ |
| Shirt Size S ___ M ___ L ___ XL ___ XXL ___ XXXL ___ | Shooter Total Cost \$ _____ |

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| <p>Mail To: Karen Armand/Sonny Clary Baker Hughes 300 Holiday Square Blvd. Ste: 300 Covington, LA 70433</p> <p>Cell: Karen: 504.430.0295 Sonny: 504.756.4266</p> <p>Fax: 504.208.4927</p> <p>Email: karen.armand@bakerhughes.com</p> <p>Email: Sonny.Clary@bakerhughes.com</p> <p>Checks: Payable to (API Delta Chapter)</p> <p>PayPal: Paypal</p> <p>Credit Card: Fill out authorization form and enclose</p> | <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right;">Total Team Cost</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td style="text-align: right;">Sponsorship (see form)</td> <td style="text-align: right;">\$ _____</td> </tr> </table> | Total Team Cost | \$ _____ | Sponsorship (see form) | \$ _____ |
| Total Team Cost | \$ _____ | | | | |
| Sponsorship (see form) | \$ _____ | | | | |

CIRCLE PREFERENCE FOR FRIDAY SHOOTING TIME: 9:00 AM 1:00 PM
 ***** PLEASE SUBMIT YOUR ENTRY AS SOON AS POSSIBLE *****