

70th Annual Colorado State Skeet Championships & Open Shoot



July 27-29, 2018

Hosted by, **Golden Gun Club, Watkins Co.**
1503 S. Watkins Rd. 80137, 303-366-6970



PRACTICE AVAILABLE THURSDAY

\$45.00 MAIN EVENTS - (ALL FEES INCLUDED)

FULL PROGRAM IS ON LINE AT, coloradoskeet.net

SAT NIGHT AWARDS BANQUET/DOOR PRIZES, ANNUAL MTG

SAT NIGHT FUN SHOOT-DBLS, 3,4,5, BACK OF THE BUS \$10.00

SCHEDULE OF EVENTS

FRIDAY	ROTATIONS	SATURDAY		SUNDAY	
DOUBLES		12ga.	20ga.	28ga.	410
1:30, 3:00	1	9:00	1:30	10:30	3:00
4:30, 5:30	2	10:30	3:00	9:00	1:30
	3	12:00		12:00	

Rotation 3 is for single guns, if rotations 1 & 2 are full

SQUADING/DEPOSIT INFORMATION

Circle preferred squad position 1 2 3 4 5
 Circle doubles preference 1:30 3:00 4:30 5:30
 Indicate rotation preference 1___ 2___ 3___ (Single Gun)

Squad preference will be given to four gun shooters on a first come basis. Shooters wishing to squad together must pre-register together. Each shooter required to send a \$50.00 deposit with pre-registration form.

Deposit for 5 man squads is \$250.00

Deposit for single gun shooters is \$20.00

All deposits payable to CSSA

Full credit for deposit will be given at time of registration

If you must cancel, please inform **Terri Gutierrez** at **303-979-3773**

by **July 20, 2018**. Shoot management will rule on special circumstances for withdrawal after that date.

Any shooter who disrupts the harmony of the shoot will be disqualified.

INFORMATION FOR EACH SQUAD MEMBER

Name _____ NSSA# _____ CSSA# _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell _____

E-Mail Address _____ Concurrents _____

Squad position 1 2 3 4 5



Register online by logging onto
www.myskeet.com **or by mail to:**

Terri Gutierrez
7664 W Ontario Pl
Littleton CO 80128

SHOOTERS WILL BE SQUADED
WHEN DEPOSIT IS RECEIVED

ADDITIONAL SQUAD MEMBER INFORMATION

Name _____ NSSA# _____ CSSA# _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell _____

E-Mail Address _____ Concurrents _____

Squad position 1 2 3 4 5

Name _____ NSSA# _____ CSSA# _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell _____

E-Mail Address _____ Concurrents _____

Squad position 1 2 3 4 5

Name _____ NSSA# _____ CSSA# _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell _____

E-Mail Address _____ Concurrents _____

Squad position 1 2 3 4 5

Name _____ NSSA# _____ CSSA# _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell _____

E-Mail Address _____ Concurrents _____

Squad position 1 2 3 4 5