

  
WILD SHEEP  
Foundation

  
USA  
Shooting Team

# 2012 Celebrity Sporting Clays Event

Date: Thursday, January 19<sup>th</sup> 2012

Time: 10:00 a.m. - 3:00 p.m.

Location: Sage Hill Clay Sports - Reno, NV

Cost\*: \$85.00 - non shooter price = \$35

\* Shooter fee includes 50 round Clay Shoot,  
ammo, lunch, transport to range, shoot swag &  
golf cart rental

Station's Sponsorship \$250.00

For questions please call: 307.527.6261

sponsored by:

  
KRIEGHOFF  
INTERNATIONAL INC.

  
ALAMO  
SPORTING ARMS

  
Sage Hill Clay Sports  
Reno - Nevada



# Sporting Clays Entry Form

Thursday, January 19, 2012



Sign-in Starts at 8:30 a.m.  
Shoot Starts promptly at 10:00 a.m.  
SAGE HILL CLAY SPORTS \* 7370 Desert Street \* Reno, Nevada \* 775-851-1123

This is a **UNIQUE** opportunity to **SHOOT** with and/or **SPONSOR** your **USA OLYMPIC SHOOTING TEAM**.

The day will include continental breakfast, door prizes, live auctions, sporting clay shoot, tri-tip lunch, raffles, Exhibition shooting by Olympians, refreshments and lots of fun. Don't miss out **REGISTER NOW!!!**

**Limited to the first 125 registrants!!!!**

### Team Contact :

Company / Team Name: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

### Roster :

Shooter #1(Captain) Name: \_\_\_\_\_

Shooter #2 Name: \_\_\_\_\_

Shooter #3 Name: \_\_\_\_\_

Shooter #4 Name: \_\_\_\_\_

### Fees :

		#	Total	\$\$\$
1.	Sponsor a Team of 4 Shooters & Enter a Special Gun Raffle		\$340.00	\$ _____
2.	Sponsor a Shooting Station		\$250.00	\$ _____
3.	Sponsor a YOUTH Shooter(s) (ages 11-18)	\$85.00 X _____ =		\$ _____
4.	Individual Shooter Fee	\$85.00 X _____ =		\$ _____
5.	Reserve Meal Ticket only for non-shooting guest	\$35.00 X _____ =		\$ _____
6.	Donation for Raffle or Registration Gifts			\$ _____
<b>TOTAL</b>				\$ _____

Mail Check Payment & Form to: Wild Sheep Foundation - 720 Allen Avenue – Cody, WY. 82414 or

**\*\*\*We are able to accept VISA / MasterCard payments \*\*\* Fax Credit Card Payment and Form to: 307-527-7117**

Type of Card:  MasterCard  Visa

Name as it appears on Card: \_\_\_\_\_

Billing address of Cardholder: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

### Questions: Contact

Terry Melby – Ph. 775.771-7653 [Terry@gmlarchitects.com](mailto:Terry@gmlarchitects.com) / Alan Wiskus - Ph. 775.750.4070 - [awiskus@pkelectrical.com](mailto:awiskus@pkelectrical.com)  
Kyle Meintzer – Ph. 775.657.8239 – [NvaGvUp@aol.com](mailto:NvaGvUp@aol.com) / Marty Harsin - Ph. 775.233.2247 - [mharsin@att.net](mailto:mharsin@att.net)