

8th

ANNUAL BENEFIT

TRAP SHOOT



Friday, August 26, 2011 | 7am - 5pm
Coon Creek Trap & Skeet Club
5393 Waltz Road
Lincoln, CA 95648



HomeAid
Sacramento



**Open to all levels ...
from first timers to experts**
Open to all shooters 21 and over

TO REGISTER OR SPONSOR THIS GREAT EVENT

go online to homeaidsac.org/news/8th_annual_homeaid_sacramento_trap_shoot or complete the form below and return by fax: (916) 677-5734 or mail to: HomeAid Sacramento 1536 Eureka Road, Roseville, CA 95661. Make checks payable to: HomeAid Sacramento (Tax ID# 68-0391843) Phone: 916.751.2747

Welcome all Shooters!

EVENT INCLUDES:

Networking, Camaraderie, Awards, Raffle, Silent Auction, TriTip BBQ, Beer and Snacks, Blackjack, Archery, Fishing, and other outdoor challenges.

Outside alcohol prohibited on grounds and surrounding areas.

TEAMS:

5 Person Teams (single shooters are encouraged to register). Team Awards for 1st - 3rd Place in both BIA & Open divisions

TICKETS:

Shooter Tickets - \$135.00 each or \$625.00 per team

Limited to 350 shooters and the field will be filled on a first come, first serve basis.

Non-Shooter Tickets - \$50.00 each (lunch and festivities included)

Only written registrations with payment in advance will be accepted (fax, mail, email); checks can be made payable to HomeAid Sacramento. HomeAid Sacramento also accepts Visa, MasterCard, AMEX. There is a no refund for no-shows policy. 72 hours prior to the event **cancellations will be accepted in writing only**- emailed to emily@homeaidsac.org or faxed to (916) 677-5734.

SPONSORSHIP OPPORTUNITIES AVAILABLE Please email HomeAid@homeaidsac.org or call 916.751.2747

REGULAR REGISTRATION -- June 1st - August 11 - \$135 each or \$675/ team

LAST MINUTE REGISTRATION -- August 12th- August 24th - \$150 each or \$750/ team

TEAM INFO

TEAM MEMBERS: *Please check one division* BIA Division OPEN Division _____ Number of loaner guns needed

_____ Number of non-shooter tickets needed

1 Name: _____ 3 Name: _____
2 Name: _____ 4 Name: _____ 5 Name: _____

TEAM NAME: _____

COMPANY: _____ Address: _____ City: _____ State: _____ Zip: _____

Phone: (____) _____ Fax: (____) _____ Email: _____

PAYMENT

Single Shooter Trap Shoot Total: _____ Charge my: Visa MasterCard AMEX

Check Card Card # _____ - _____ - _____ Exp. Date: _____

OR _____

Team Card holder's email (required): _____

Check Card Billing address: _____

CRV code: _____ Signature: _____

(3-digit security code on back of card)

SUPPORT HOMEAID'S BUILD & CARE PROGRAMS | 2011 HomeAid projects include: Lazarus Project, Sacramento Emergency Housing Center, Volunteers of America Options for Recovery, WEAVE Children's Center and Yolo Wayfarer Center

