

8th Annual Ohio Aglime Council

SPORTING CLAY SCHOLARSHIP FUNDRAISER

Cardinal
shooting Center



Cardinal Sporting Clays

616 Ohio 61, Marengo, OH 43334

Friday, September 14, 2018

Benefiting the
Ohio Mining and Mineral Education Program (OMMEP)
Scholarship Fund

Registration Fee: \$125.00 per person

- Fee includes: 50 Bird Shoot, Lunch and (1) bonus Raffle ticket for the Gun Raffle
- Arrive no later than 9:00 a.m. for a 9:30 "Shotgun Start"
- Hearing & eye protection strongly recommended (earplugs and loaner safety glasses are available on site)
- Bring your own shotgun, or rental guns are available on site by prior arrangement. Call (419) 253-0800 to reserve.
- The Event is open to the public - but must pre-register

Each squad will have 4 persons. Please list names below:

1. _____
2. _____
3. _____
4. _____

Company Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Cell Phone #: _____ **Email:** _____

Number attending: _____ **x \$125.00** **Amount:** _____

Return Form & Make Checks Payable to:

OAIMA – 746 Morrison Rd., Gahanna, OH 43230 - (614) 428-7954

To use a Credit Card:

Fill out the information below and fax or email to (614) 428-7919 / dawnh@oaima.org

Name on Card: _____ **Circle one:** Visa MC Discover AM

Credit Card #: _____ **Expiration Date:** _____ **SVC Code:** _____

PURCHASE ADDITIONAL RAFFLE TICKETS HERE

As part of the OMMEP scholarship benefit, OMMEP and the Ohio Aglime Council are raffling a gun. The winning ticket will be drawn following lunch at the Sporting Clay Shoot but the winner does not need to be present to win. **Gun Details and Description TBA.**

RAFFLE TICKETS: \$20 EACH

Fill out this registration form and indicate number of tickets you want here: _____

(Winner does not have to be present at the shoot)

Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Total Amount (\$20 x # tickets) = \$ _____

Return Form & Make Checks Payable to:

OAIMA – 746 Morrison Rd., Gahanna, OH 43230 – (614) 428-7954

To use a Credit Card:

Fill out the information below and fax or email to (614) 428-7919 / dawnh@oaima.org

Name on Card: _____ Circle one: Visa MC Discover AM

Credit Card #: _____ Expiration Date: _____ SVC Code: _____

