



Proudly Present

Air Rifle Summer Camp

Rifle camp is for students entering grades 7-11. Camp will focus on the fundamentals of three-position shooting. Camp will culminate in an actual 3-position match. Incoming freshman and current high school students will use their score from this match as their qualifying score for their team. We will continue our junior high program through the 2017-2018 season. Summer Camp can also be used to earn the Rifle Merit Badge for Boy Scouts.

Camp Director, Coach Gregg Rice, is an Advanced Coach (USA Shooting) and a member of the National Coach Development Staff.

6:00 - 8:00 pm

Available Sessions (Each athlete will attend the same day each week for five weeks):

1. (Mondays) June 19, 26, July 3, 17, and 24

_____ 2. (Tuesdays) June 20, 27, July 11, 18, and 25

_____ 3. (Wednesdays) June 14, 21, 28, July 12, and 19

5. (Fridays) June 16. 23. 30. July 14. and 21

4. (Thursdays) June 15, 22, 29, July 13, and 20

| Sessions scheduled to accommodate makeup days for family vacations or other camps. Attire: Sweat pants, T-shirt, sweatshirt, and gym shoes that do not go above the ankle. Return this completed form below to: The X Count • 5301 Merchandise Drive • Fort Wayne, IN • 46825 Questions email or call Diane Rice at thexcount@gmail.com or (260) 437-3860 www.TheXCount.com *\$100 Registration fee includes use of Rifles, Ammunition, targets, and T-Shirt *Remit this application and waiver, Emergency Medical Release, and fee to: The X Count *Session Choice | |
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| Student's Name Parent's Name Zip | |
| Student's Name Parent's Name Zip | |
| Address Zip | |
| | |
| Cell Phone Emergency Phone | |
| | |
| Email AddressSchool (2016-2017) | - |
| School (2017-2018) Date of Birth Grade (2017-2018) | - |
| Shirt Size Adult small medium large XL XXL | |
| I hereby give my son/daughter permission to take part in the Air Rifle Summer Camp. I will not hold the sponsor of facility owner, or The X Count and its representatives, liable for any injuries that might occur. I have medical/hospi to cover such injuries. | • |
| Parent/Guardian Signature Date | |