

Aim For Education

CLAY SHOOT EVENT



Communities
In Schools

The Coastal Bend

NOVEMBER 14TH 2020

CORPUS CHRISTI PISTOL & RIFLE CLUB

2832 FM 763

\$600.00 for a 4 man Team includes:

- Golf Cart
- Breakfast & Lunch
- \$150.00 per shooter

Schedule of Events:

- Registration 8:00am - 8:30am
- Safety Training 8:30am - 9:00am
- Shooting Begins 9:00am
- Lunch following

For entry and sponsorship information contact:
Communities In Schools of the Coastal Bend (361) 696-4030



Sporting Clay Event

Sponsorship Opportunities

Title Sponsor \$5,000

- 4 Person Team & Golf cart
- Priority logo placement on banners and printed materials

Corporate Sponsor \$2,500 – H-E-B

- 4 Person Team & Golf cart
- Preferred logo placement on banner

Station Sponsor - \$1,000

- 4 Person Team & Golf cart
- Sponsor sign at station
 - 14 stations available

Team Sponsor - \$600

- 4 Person Team & Golf cart

Registration Fees For All Shooters Includes:

- All field fees
 - Breakfast
- Lunch and Refreshments
- A Chance For Door Prizes
- \$25 spectator fee (includes breakfast & lunch)

*****AMMUNITION IS NOT INCLUDED*****



Team Registration Form

Please return this page to

Communities In Schools of the Coastal Bend

P.O. Box 331203, Corpus Christi, TX 78463 or

Scan: mollie.silva@ccisd.us

****This form is due two weeks before the event****

Team Name (or individual): _____ Contact: _____

Name:
Email:
Phone #:
Address:
T-Shirt Size:

Name:
Email:
Phone #:
Address:
T-Shirt Size:

Name:
Email:
Phone #:
Address:
T-Shirt Size:

Name:
Email:
Phone #:
Address:
T-Shirt Size:

Method of Payment: (circle one)

MasterCard VISA Discover Check (Payable to Communities In Schools)

Card # _____ Exp. Date: _____ CSC Code: _____

Registration Amount (team or individual) \$ _____

Printed name on card: _____

Signature _____ Total Amount Charged to Credit Card \$ _____

Registration Form

for Event Sponsorships

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Event Sponsorship Level: _____

Sponsorship Amount: _____

Contact name: _____

Email: _____

Phone #: _____

Address: _____

Method of Payment: (circle one)

MasterCard

VISA

Discover

Check (Payable to Communities In Schools)

Card # _____ Exp. Date: _____

CSC Code: _____

Sponsorship Level _____ Sponsorship Amount \$ _____

Printed name on card: _____

Signature _____

Total Amount Charged to Credit Card \$ _____