



SHOOT FOR THE KIDS



Saddle + Sirloin Club

SHOOTER INFORMATION

Please provide shooter information for each team of 4. If you have more than one team, please make a copy of this form and provide information for all shooters/teams. Team information must be submitted by **Monday, April 8, 2019.**

Shooter #1 Name: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Shooter #2 Name: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Shooter #3 Name: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Shooter #4 Name: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

For more information, please contact Shadow Buddies Foundation at (913) 642-4646 or email buddies@shadowbuddies.org