



NATIONAL RIFLE ASSOCIATION OF AMERICA
Incorporated 1871
11250 Waples Mill Road, Fairfax, VA 22030

**NRA National Junior Advanced Competitive Smallbore Rifle Camp
Prerequisites and Qualifications**

02 March 2015

Dear Prospective Rifle Camp Applicant:

The NRA National Junior Advanced Competitive Shooting Camp is an intense, challenging and demanding training opportunity for **advanced athletes**, who attend matches to **compete, not just shoot**. The camp will be conducted **July 6 – July 14th, 2015 in Jericho, VT. Camp tuition this year is \$300.**

A highly qualified applicant will be one that:

- Has experience in **three position smallbore** scores in major matches. Scores should average 1090 (545 half course) or higher.
- Is committed to **competing** at the collegiate level and/or as a member of the USAS National Development Team.
- Is open to coaching which will likely challenge him/her to reconsider some long-held beliefs or techniques.
- Is open to being coached, incorporating and using new ideas and techniques.
- Is open to being challenged, having mental and physical limits pushed to the next level
- Understands that the coaching staff has high expectations for them as advanced athletes
- Will put forth the required level of commitment, attitude, effort and desire to improve his or herself, both on the firing line and the classroom
- 14-20 years old at the start of camp. There are no age waivers.

The typical camp day starts with breakfast at 7:00 am and ends at 9:00pm every day except for departure day. As you make your decision to apply for this camp, understand that you need to be physically and mentally prepared for a minimum of six hours of daily shooting and two and a half hours of classroom instruction. This is an advanced camp and you need to be able to commit to handle this type of advanced training.

Fill out the registration packet in its entirety as instructed. Incomplete or improper applications can result in a delay of your application or result in not being accepted to camp.

Notification of selection will be made on or about May 22, 2015. Send in your application postmarked no later than May 1, 2015. You may supply additional information, such as other match scores, any time after your initial application. A follow-up telephonic interview by a staff coach may be needed.

Return application packet to:
NRA E&T Attn: Adv Smallbore Camp
11250 Waples Mill Rd
Fairfax, VA 22030

PARENTS: Please note that we are in a remote training environment, with medical assistance (ambulance) 15 minutes away. We eat catered meals with limited to no menu flexibility and we are not equipped to properly handle athletes who are not able to **fully** participate in training, on and off the range.

2015 NRA NATIONAL JUNIOR ADVANCED COMPETITIVE SHOOTING CAMP

Rifle Application Form

July 6 – July 14th, 2015 Jericho, Vermont, 05465

Name: _____ Social Security Number (SSN): XXX-XX-_____

Date of Birth (mm/dd/yyyy): ____/____/____ Age: _____ Gender ____

Address: _____

City: _____ State: _____ ZIP: _____

Daytime Phone: _____ Evening Phone: _____

E-mail: *please print neatly* _____

T-Shirt Size: Medium Large X-Large XX-Large

I have an automatic invitation based on my participation in the 2014 Intermediate Junior Rifle Camp at Camp Perry, Ohio. A copy of my certificate is attached. (Required) (Must be 14 at start of NJACSC)

INDIVIDUAL INFORMATION:

A. My best **Three Position Smallbore Rifle (only)** scores in a National Championship, National Junior Olympic Championships, Regional, or Sectional competition are (**attach bulletins**):

B. My best **Three Position Smallbore Rifle (only)** scores in league, local, or state matches (including State Junior Olympic Championships) are (**attach bulletins**):

HANDWRITE the answers to the following questions completely. Use added paper as needed.

1. *Of the scores above, which are you most proud of and why? Which are you least proud of and why?*
2. *This camp is for **advanced competitors**. A competitor has a different mindset and training regimen than someone who goes to a match just to shoot. Why do you consider yourself an advanced competitor?*
3. *What are your specific learning goals for this camp, on and off the firing line?*

What is your current grade point average (attach a copy of your most recent report card):

You may attach additional copies of match bulletins, letters of recommendation, or any other documentation you may wish the camp head coach to consider. This application **MUST BE COMPLETED BY THE ATHLETE**, and must be filled out by hand (no typed responses will be accepted). **ADDITIONAL PAGES MAY BE USED FOR YOUR ANSWERS.**

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Rifle Application Form
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PHOTOGRAPH RELEASE/AGREEMENT

(DO) (DO NOT) authorize NRA Shooting to photograph my person or property and to publish such photographs for any lawful purpose.

Athlete's Signature: _____

Parent's Signature (if athlete is under 18): _____
(Parent Signature)

ATHLETE AGREEMENT:

I agree to comply with the rules and regulations of the National Rifle Association's National Junior Advanced Competitive Shooting Camp, to follow instructions as given by the camp staff, and to conduct myself in a safe and responsible manner. I further agree that I will not consume large amounts of sugar, or use any tobacco products, or consume large amounts of caffeine, or consume any alcoholic beverages or illegal drugs while attending this camp.

I am in sound physical condition and can participate **FULLY in all NJACSC activities**. If accepted I understand I will have to complete the required Camp Medical Form which will be provided in the acceptance message.

I have listed below any exceptions or unusual circumstances that coaches may need to know for me to participate FULLY in a safe environment e.g. diet. The camp is not equipped or prepared to properly handle an athlete with challenging medical, physical, emotional, or other issues.

Limitations (if none, so state): _____

Athlete's Signature: _____

Parent's Signature: _____

(Required regardless of age of the athlete)

Applications must be received no later than 1 May, 2015. Applications received after that date will be considered only on a space available basis.

Please complete the following: Coach's Name: _____

email: _____ Telephone number: _____ - _____ - _____

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NATIONAL JUNIOR ADVANCED COMPETITIVE SHOOTING CAMP
MEDICAL INFORMATION FORM

The Medical Information form will be kept onsite with Camp Staff for the duration of the camp. This form requests basic medical history information and will be retained at NRA for 18 months after the camp is over.

DATE: _____ SOCIAL SECURITY NUMBER OF ATHLETE: XXX - XX - _____

NAME OF CAMP ATHLETE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

DATE OF BIRTH: _____ SEX: _____ HEIGHT: _____ WEIGHT: _____

PARENT (or guardian) NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: () _____ WORK PHONE: () _____

CELL PHONE: () _____

EMERGENCY CONTACT #1 NAME: _____ RELATIONSHIP: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: () _____ WORK PHONE: () _____

CELL PHONE: () _____

EMERGENCY CONTACT #2 NAME: _____ RELATIONSHIP: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: () _____ WORK PHONE: () _____

CELL PHONE: () _____

PRIMARY CARE PHYSICIAN: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: () _____ CELL PHONE: () _____

Health/accident insurance carrier and appropriate policy certificate number: _____

PLEASE ATTACH A COPY OF YOUR INSURANCE CARD(S)

To be completed by the attending medical official (Physician, Physician's Assistant or Nurse Practitioner).

Does this athlete have any chronic or acute medical problems? YES: _____ NO: _____

Please explain: _____

List any allergies to food, pollen, insects, or medicine: _____

Are any of these allergies potentially serious e.g. severely allergic to peanuts? _____ Explain _____

List any medications being taken at present time: _____

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List any other condition(s) we should be aware of, particularly those which would be problematic in a remote training site with communal living and with set catered meals:

This athlete is released for **full and unrestricted** participation in the 2015 NRA National Junior Advanced Competitive Shooting Camp.

Signed by Doctor/PA/ Nurse Practitioner: _____

Date: _____

I certify that my child is fully and completely capable of participating in any and all camp activities, on or off the range, with no limitations or restrictions. If this not the case, please explain in detail: _____

Name of Parent/Guardian: _____

Signature: _____ Date: _____

Witness:

Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

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