

# AIM for ATA!

The official youth program of the ATA is the perfect way to become involved in a fun and unique lifetime sport. From Elementary School through College, competitors will have the chance to compete against teams of their own skill level while learning firearm safety, academic responsibility, and the fundamentals of trapshooting. AIM for ATA is a program that was designed to grow with the participant to ensure an ever challenging sport! The AIM program is open to any organization with a Youth program currently in place or for any organization wishing to create a youth program. Now's your chance to shine; victory is yours for the taking! If you would like to participate in AIM, fill out the attached form and return it to the ATA at:

Amateur Trapshooting Association  
C/O: Edie Fleeman  
5000 Mandel Road  
Durham, NC 27712

For more information, visit  
[www.aim4ata.com](http://www.aim4ata.com) or call Edie  
Fleeman at (937)-546-0055.



The Official Youth Program of the Amateur Trapshooting Association - Academics - Integrity - Marksmanship



AIM for ATA is a program of the  
Amateur Trapshooting Association  
601 West National Road  
Vandalia, OH 45377  
(937) 898-4638  
[www.shootata.com](http://www.shootata.com)

# Participant Registration Form and Parental Consent Form



Return completed form to:  
Amateur Trapshooting Association  
ATA Coaching  
601 West National Rd  
Vandalia, OH 45377



(Please print clearly)

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

ATA Membership Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ [ ] Male [ ] Female Grade in School: \_\_\_\_\_

Age Group Participating In (see ATA Rule Book, Section IV.J.6 and 7): \_\_\_\_\_

School or Club Affiliation: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Coach: \_\_\_\_\_

Coach's Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

## PARENTAL CONSENT

I/we knowingly and willingly agree to indemnify and hold harmless the Amateur Trapshooting Association, its officers, directors, authorized agents and/or volunteers from any and all claims or causes of action arising from or associated with our participation in the AIM for ATA program.

\_\_\_\_\_  
(Parent/Guardian's Signature)

\_\_\_\_\_  
(Date)

Parent's Home Phone: (\_\_\_\_) \_\_\_\_\_

Parent's email address: \_\_\_\_\_@\_\_\_\_\_