



USPSA *CLUB MATCH*



CLASSIFIER SUMMARY SHEET

* SINGLE STACK *

Please submit this form, along with a Classifier Match Activity Report and the activity credit fee, to USPSA **within 30 days of holding the match**. A computer printout, if it is set up in this same format, may be submitted in place of this form.

CLUB NAME: _____ CLUB CODE: _____
Do not use initials.

MATCH DATE: _____ CLASSIFIER NAME _____

- Send this form to USPSA. Scores will be entered from this form. Do not send score sheets.
- Record all classifier match hit factors on this form.
- Enter only valid hit factors for shooters with CURRENT USPSA cards. DO NOT enter zeros, DNFs or DQs.

CM COURSE # _____ - _____

	USPSA #	SHOOTER NAME	HIT FACTOR
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	USPSA #	SHOOTER NAME	HIT FACTOR
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