



# REFEREE EXAMINATION

Dear Sir

Having received a recommendation in accordance with the requirements of the ACTA Shooting Rules, I have completed a practical and oral examination of:

NAME:	
ADDRESS:	
POSTCODE:	M/SHIP No:

I rate his/her knowledge of the ACTA Rules as follows: (please tick)

TRAP RULES	
SKEET RULES	
ISSF RULES	
SPORTING CLAYS	

COMPETENT	
NOT YET COMPETENT	

I rate his/her knowledge of the ACTA Championship Conditions as follows:

TRAP	
SKEET	
ISSF	
SPORTING CLAYS	

COMPETENT	
NOT YET COMPETENT	

I recommend that he/she be placed on the list of registered referees.

YES	
NO	

For

TRAP	
SKEET	
ISSF	
SPORTING CLAYS	

Referee Examiner's Signature:

Print Name and ACTA Number:

Referee Examiner in the discipline of:

Dated: