**NOMINATION FOR VICTORIAN 2024 STATE TEAM ACTION MATCH**

**National Championships Sporting Shooters Pistol Club, Majura ACT – October 2024**

**To be submitted by 30 June 2024 to VAPA Team Manager** [teammanager@vapa.org.au](mailto:teammanager@vapa.org.au)

If after this date, please contact the Team Manager to discuss your nomination.

Please indicate the matches you wish to nominate for by inserting your grade and the highest score shot in an Open competition in the past 12 months in the table below.

The selection period each year will enable a team to be picked prior to the PA Nationals.

Competing in the VAPA Action State Championships (Aug 2024 is mandatory to be selected in the team.

|  |  |  |  |
| --- | --- | --- | --- |
| **Division / Category** | **Grade:** | **Highest Score and Competition where it was achieved in the past 12 months** | **X’s** |
| Open |  |  |  |
| Metallic Sight |  |  |  |
| Production |  |  |  |
| Production Optics |  |  |  |
| Ladies |  |  |  |
| Junior |  |  |  |

I wish to nominate to be considered in the events indicated below for the State Team that will represent VAPA at the 2023 National Championships. I have read and agreed to the VAPA State Team Selection Method. I undertake to abide by the decision of the Team Selection Sub-Committee and, if selected, the conditions of the State Team Agreement.

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | | |
| Signature |  | Date |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Full Name: |  | | | | | | |
| Preferred name |  | | | | | | |
| Address: |  | | | | | | |
|  |  | | | Postcode | |  | |
| Postal Address: |  | | | | | | |
|  |  | | | Postcode | | |  |
| Telephone: | Home |  | Business | |  | | |
|  | Mobile |  | Fax | |  | | |
| E-Mail: |  | | | | | | |
| Club: |  | | | | | | |