



**Girls on Target
Saturday June 24, 2017**

Presented by High Rock Shooting Association

What: Girls on Target sponsored by HRSA will promote firearms safety and education, as well as family bonding by participation in an exciting and fun sport. **Girls on Target** is open to girls ages 8-18 and their parents, whether they are novice or experienced shooters.

Where: High Rock Shooting Range, Black Forest Road, Naugatuck State Forest, Naugatuck, CT 06770
Directions: www.highrockrange.com (Click on "Directions" link at top of page.)

When: Saturday June 24, 2017. Session times are at 9:00 AM, 11:30 AM and 2:00 PM. Sign-in begins 30 minutes prior to each session.

Schedule: 08:30 AM – 09:00 AM: Morning Session Sign-in
09:00 AM – 11:00 AM: Introduction, Mandatory Safety Briefing & Instructional Shooting
11:00 AM – 11:30 AM: Mid-morning Session Sign-in
11:30 AM – 1:30 PM: Introduction, Mandatory Safety Briefing & Instructional Shooting
1:30 PM – 02:00 PM: Afternoon Session sign-in
2:00 PM – 04:00 PM: Introduction, Mandatory Safety Briefing & Instructional Shooting

FEE: \$20.00 PRE-REGISTRATION REQUIRED

Participants **MAY NOT** bring their own firearms **Firearms and Ammunition will be provided. Eye and Ear protection will also be available if needed. Pre-registration required by June 12, 2017.**

Contact: Judy Hardy (860-435-0883), or email: jagghdesigns@sbcglobal.net

Additional Information: Please do not wear tank tops or sandals. **An email confirmation will be sent to you prior to the event to confirm your registration time. Additional registration forms are available at <http://www.highrockrange.com>**

**Girls on Target, Saturday, June 24, 2017 (High Rock Shooting Association)
Send advanced registration to: High Rock Shooting Association, c/o Judy Hardy,
P.O. Box 1167, Sharon, CT 06069**

Parent's Name: _____

We will attend: ___ 09:00 AM Session

Street _____

___ 11:30 AM Session

City, State, Zip: _____

___ 2:00 PM Session

Telephone: _____

My child has: ___ never shot before

Email: _____

___ some shooting experience

Child's Name & Age: _____

Check #: _____