

# 2014 CMP High Power Rifle Clinics

Conducted and Sponsored by the

## Vermont State Rifle and Pistol Association (VSRPA)

**Instruction:** NRA Expert, Master and High-Master VSRPA members proficient in the use of US Military Service Rifles will provide instruction in the safe handling and operation of primarily the AR-15 and M-1 Rifles, along with hands-on instruction in shooting positions, range procedures and live firing for familiarization.

**Where and When:** All clinics will be held at the Camp Ethan Allen Training Site (CEATS) located in Jericho / Bolton, VT, starting at 9:00 AM on **June 21<sup>st</sup>**, **July 12<sup>th</sup>** and **August 9<sup>th</sup>**. All clinics held at range 3-2. *See map for directions.*

**Eligibility:** Each Clinic Attendee must sign a Liability Release in advance; an attendee cannot have been convicted of any Federal or State Felony or be in violation of Section 922 of Title 18 United States Code, and they cannot be a member of any organization that advocates the overthrow of the United States Government.

**Qualifying Rifles:** This clinic is pre-dominantly for orientation to AR-15; however the following US Service Rifles may also be used by participants: **M1 Garand, or M1-A**

**Equipment Needed:** If the attendee has a shooting jacket, glove or sling these should be brought. If possible, participants are encouraged to bring their own Hearing Protection and Eye Protection. All necessary equipment required for safety and safe shooting including jacket, glove, sling scope, scope stand, mat, rifle, ammunition and eye and ear protection will be provided.

**CMP Qualification:** An NRA approved match will be fired the following day (Sunday **June 22<sup>nd</sup>**, **July 13<sup>th</sup>** and **August 10<sup>th</sup>**), with all of these matches held at range 4-1. A limited number of M-1 Garands and AR-15s will be made available by the VSRPA along with ammunition for use at both the Clinic and the Match by pre-arrangement. Coaching will be available for the Match for all participants. For new shooters, attendance in the Clinic is a pre-requisite for shooting in the Match the following day, with participation in the Match being a pre-requisite for purchasing US Surplus Service Rifles and ammunition from the CMP ([www.odcmp.com](http://www.odcmp.com)).

**Lunch:** No food service will be available; Please bring something to drink, something for lunch and rain gear.

**Contact:** VSRPA – CMP Shooting Clinic phone: (802) 485-6818  
454 South Main Street email: [secretary@vsrpa.org](mailto:secretary@vsrpa.org)  
Northfield, VT 05663

### Fees:

| Age Group      | Clinic Cost | Clinic Ammo Cost | Optional Match Cost | Optional Match Ammo Cost             |
|----------------|-------------|------------------|---------------------|--------------------------------------|
| Junior (14-17) | \$5         | Free             | \$10                | Free                                 |
| Adult          | \$20        | \$25             | \$20                | \$15 per box of 20rds (min. 3 boxes) |

>> Clinic attendees will receive a Completion Certificate, which will allow the attendee <<  
>> to purchase rifles and ammunition directly from the CMP <<

**Registering:** Please fill out the CMP form available near this notice along with the Liability Release, or download these documents from the VSRPA website located at [www.vsrpa.org](http://www.vsrpa.org). Send completed documents and payment to the above address, or call ahead and bring the completed documents and payment to the Clinic.

**Acknowledgement:** For 2014, the Clinics the VSRPA is conducting are sponsored by a \$1,000 Grant provided by the Friends of the NRA, as Administered by the VT Federation of Sportsmen's Clubs.  
The VSRPA gratefully acknowledges this support.

VSRPA – CMP Shooting Clinic  
[www.vsrpa.org](http://www.vsrpa.org)

# 2014 High-Power Rifle Clinic Registration Form

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## Vermont State Rifle and Pistol Association (VSRPA)

Name: \_\_\_\_\_  
(First Name) (Initial) (Last Name)

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

City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Birthday: \_\_\_\_\_ (if under 18)

NRA #: \_\_\_\_\_ (optional)

### Clinic Worksheet

\* \* \* A Release of Liability Form must be signed prior to the Clinic Start \* \* \*

I will attend the Clinic on: June 21<sup>st</sup> July 12<sup>th</sup> Aug 9<sup>th</sup>

I will attend the Match on (Match attendance is completely optional):  
June 22<sup>nd</sup> July 13<sup>th</sup> Aug 10<sup>th</sup>

I will need the use of a rifle: Yes No

Clinic Fee (Juniors 17 or younger \$5, Adults - \$20) ..... \$ \_\_\_\_\_

Ammo Fee for Clinic (Approx 50 rounds – you can supply your own)  
Juniors - free, Adults - \$25 ..... \$ \_\_\_\_\_

Optional Match (Juniors \$10, Adults \$20) ..... \$ \_\_\_\_\_

Ammo Fee for Match (80-shot NRA match – you can supply your own)  
Juniors – free, Adults - \$15 per box (min. 3 boxes) ..... \$ \_\_\_\_\_

Barracks Fees (\$10 per person per night)..... Friday... Saturday ..... \$ \_\_\_\_\_

**Total** \$ \_\_\_\_\_

Send this completed form, liability release and entry fees to:

**VSRPA Clinics, 454 South Main Street, Northfield, VT 05663**

**Phone: (802) 485-6818**

**E-Mail: [secretary@vsrpa.org](mailto:secretary@vsrpa.org)**

# Vermont Army National Guard Liability Release

## Release of Liability, Hold Harmless and Indemnification Agreement

In consideration of use for the military range, I freely accept and voluntarily assume ALL RISK of personal injury or death or property damage. I specifically acknowledge the risks associated with firing weapons, which can include severe personal injury and even death, and hereby assume the risk of firing said weapons.

I hereby release, remise, discharge and covenant not to sue the State of Vermont, Vermont National Guard, and in so far as applicable, the United States and the United States Armed Forces, and its agents, volunteers and employees from any and all liability for personal injury or death or property damage which results in any way from negligent actions and/or omissions of employees, volunteers and/or agents of the Vermont National Guard, the State of Vermont or the United States Armed Forces, arising out of the conditions on or about the premises and the facilities used for the **Vermont High Power Rifle Championships, related matches and other civilian shooting events throughout a season**, including but not limited to natural or man-made obstacles and its placement, visibility or condition or my participation in any activity during the **Vermont High Power Rifle Championships, related matches and other civilian shooting events throughout a season** ACCEPTING MYSELF THE FULL RESPONSIBILITY FOR ANY AND ALL SUCH INJURY OR DEATH OR DAMAGE OF ANY KIND WHICH MAY RESULT. I ESPECIALLY AGREE TO ASSUME ALL RISK OF PERSONAL INJURY OR DEATH OR PROPERTY DAMAGE ASSOCIATED WITH PARTICIPATION IN THE EVENT.

If I am signing on behalf of a minor, I hereby certify that I have full authority to act as his/her legal guardian and in that capacity I understand that in case of injury or illness of a minor, I will be notified. If it is impossible to contact me and it is an emergency, I hereby give permission for an attending physician to treat, hospitalize, administer anesthesia, or to order injections or surgery for the safety of the minor child.

I hereby agree to fully indemnify and hold the Vermont National Guard and the State of Vermont and to the extent applicable the United States Armed Forces, harmless from any and all damages or losses or actions of any kind brought by any person, including the minor, which arises out of the participation in and / or attendance at the activities of the **Vermont High Power Rifle Championships, related matches and other civilian shooting events throughout a season**.

\_\_\_\_\_  
**Printed Name of Participant**

\_\_\_\_\_  
**Age**

\_\_\_\_\_  
**Telephone Number**

**Address:** \_\_\_\_\_

\_\_\_\_\_  
**Signature of Participant**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Parent / Legal Guardian Signature**

\_\_\_\_\_  
**Date**

**Emergency Contact Information (Name(s) and Telephone Number(s)):**

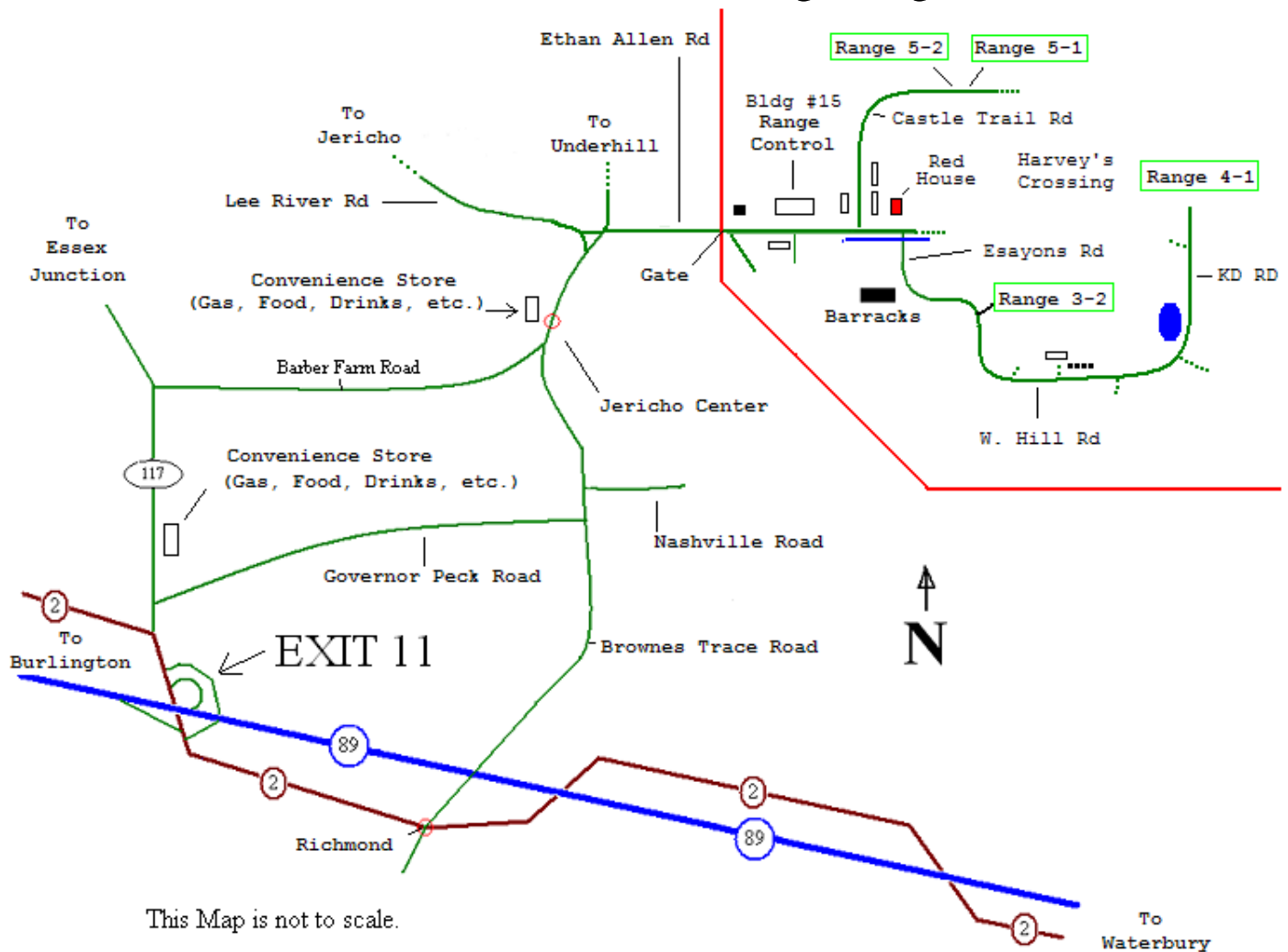
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# Directions to Ethan Allen Firing Range (EAFR)



## Entry to EAFR/CEATS:

- 1) Proceed to **Ethan Allen Rd.**
- 2) Proceed **.7 miles** on Ethan Allen Road to reach the **EAFR/CEATS Gate Shack**. This Gate Shack may or may not have a guard present. If not, proceed. If so stop, identify yourself and state your purpose (VSRPA shooting activity on range x). You may have to show valid ID (Driver's License Acceptable) to gain entry.

**PLEASE OBEY 25 MPH SPEED LIMIT.**

## To Ranges 3-2 and 4-1

- 3) Proceed **.5 miles** past the **EAFR Gate Shack** and then take a **Right Turn** on **Esayons Rd**. You will have just passed a Red House on your left, and you will be crossing a creek at **Harvey's Crossing**.
- 4) **Range 3-2** will be on your left approximately **.5 miles** from the Right Turn, Esayons Rd becomes W Hill Rd.
- 5) **Range 4-1** will be ahead of you approximately **2.8 miles** from the Right Turn; keep following W. Hill Rd, then a sharp left onto KD Rd.
- 6) The **Barracks** (available for overnight use) are **.2 miles** on your right just past the Right Turn on Esayons Rd.

## To Ranges 5-1 and 5-2

- 3) Proceed **.3 miles** past EAFR Gate Shack and then make a **Left Turn** onto **Castle Trail Rd**. You will be on a paved road that passes large warehouse buildings on your right, and a vehicle maintenance compound on your left. The road will turn to dirt and will curve around an up a hill to your right; stay on main road.
- 4) Ranges 5-1 and 5-2 will be approximately **.5 miles** on your left from the Left Turn.