



**Final Event Report  
NRA 3 Gun Experience**

Complete form in its entirety and mail or email to:  
NRA – 3GE, 11250 Waples Mill Road, Fairfax, VA 22030 or email to [nrasports@nrahq.org](mailto:nrasports@nrahq.org)

**SPONSOR INFORMATION**

State:	
Zip Code (5 digit) of where event was held:	
Sponsoring Organizations Name:	
Sponsoring Organizations Address:	

**NRA 3 GUN EXPERIENCE EVENT INFORMATION**

Event Date:	Event Host Name and Location (include address):
Event Director:	Phone – Day:
Mailing/Shipping Address:	Phone – Evening:
	E-Mail Address:

**EVENT INFORMATION**

NUMBER OF YOUTH BOYS PARTICIPANTS 17 and younger	NUMBER OF YOUTH GIRLS PARTICIPANTS 17 and younger	TOTAL NUMBER OF YOUTH PARTICIPANTS 17 and younger	HOW MANY NOVICE SHOOTERS?
NUMBER OF ADULT MALE PARTICIPANTS 18 and older	NUMBER OF ADULT FEMALE PARTICIPANTS 18 and older	TOTAL NUMBER OF ADULT PARTICIPANTS 18 and older	HOW MANY NOVICE SHOOTERS?
TOTAL NUMBER OF VOLUNTEERS	TOTAL NUMBER OF VOLUNTEERS WITH NRA CERTIFICATION	HOW MANY PARTICIPANTS WERE VETERANS	HOW MANY PARTICIPANTS WERE DISABLED

### NRA 3 GUN EXPERIENCE GENERAL QUESTIONS

If applicable, how many people, including volunteers, benefited from this project or program in previous years?	
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Had you not received this funding, what would have been the impact on your project or program? (250 words or less)	
	E-Mail Address:

Check (one) what type of NRA 3 Gun Experience event did you conduct:

√	<b>SHOOTING EVENTS</b>
	NRA 3 Gun Experience .22
	NRA 3 Gun Experience Airsoft

**\*\* In order to receive funding, your event *must* be registered online at <http://nraday.nra.org>\*\***

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_