OCCONEECHEE COUNCIL RANGE EXEMPTION

NAME: _____

EMAIL: _____

PHONE: _____

DATE NEEDED: _____

TIME BEGIN _____ TIME END _____

REASON FOR EXEMPTION:

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

APPROVALS:

Shooting Sports Committee Chairman

_____ Date _____

Camp Director

_____ Date _____