

C	P	C	A
CANADIAN	POLICE	COMBAT	ASSOCIATION

DUTY PISTOL

NATIONAL INDIVIDUAL RECORDS

CPCA Registered Tournament Name & Location:	Date scores were fired (DD/MM/YYYY):
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NAME:

CPCA #:

	Score*	X's
Match #1 – CPCA 1500 Course of Fire		
Match #2 – CPCA 1500 Course of Fire		
Match #3 – CPCA 1500 Course of Fire		
Match #4 – CPCA 1500 Course of Fire		
Match #5 – CPCA 1500 Course of Fire		

	Score*	X's
Aggregate Score – CPCA 1500 Course of Fire		

I, _____ (Print Name - Referee) hereby certify that the above noted team members fired the score recorded and that the firing was done in accordance with current CPCA Police Pistol Combat Rules. I further certify that: 1. these team members declared their team entry and designation prior to the start of the team match and 2. the triggers of the firearms used in firing the submitted scores was weighed immediately after the firing of such record in compliance with Rule 9.14 and met the specifications of Section 3 - CPCA Police Pistol Combat Rules.

Official Referee Signature:	Date (DD/MM/YYYY):
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* Scores must also be submitted on **CPCA Statistical Record** sheets. Both must be mailed within 48 hours of completion of tournament to: CPCA Statistician – 11 Eagle Lake Cove Winnipeg, Man. R2G 4E1