

# The Cast Bullet Association, Inc.

Temperature:			Skies:			Winds:			Range Faces:		
<b>SCORE AGGREGATES</b>			<b>5 SHOT GROUP AGGREGATES</b>			<b>10 SHOT GROUP AGGREGATES</b>			<b>RELAY</b>	<b>BENCH</b>	
100 Yd Score	200 Yd Score	Grand Agg. Score	100 Yd 5 Shot	200 Yd 5 Shot	100 / 200 MOA	100 Yd 10 Shot	200 Yd 10 Shot	100 / 200 MOA			
									\$	Paid ( )	
<i>Match Directors: Enter Scores, Groups &amp; Range Conditions In The Appropriate Boxes Above</i>										Left-hand Bench ( )	

Entrant's Name: \_\_\_\_\_

Range: \_\_\_\_\_

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

Location: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date: \_\_\_\_\_

E-mail: \_\_\_\_\_

Home Range: \_\_\_\_\_ *If you are a guest at this shoot.*

<b>CLASS</b>	Production	Heavy	Unrestricted Rifle	Unrestricted Pistol
	PRO ( )	HVY ( )	UnR ( )	UnP ( )
	Long Range Handgun	Hunting Rifle	Indicate Class	
	LRH ( )	HNT ( )	Military ( )	
Plain Base Bullet	Breech Seat? Yes ( ) No ( )			
PBB ( )				

Are You A CBA Member? Yes ( ) No ( )
Do You Reload At The Range? Yes ( ) No ( )
Do You Require A Left-hand Bench? Yes ( ) No ( )

## ENTRANT'S TECHNICAL DATA USED IN A CBA REGISTERED SHOOT

### NOTE TO COMPETITORS

Once the Equipment, Bullet & Load sections have been filled out the first time for each gun and submitted to the Director of Registered Competition, please, *only enter the data that is different* from the last time you used the gun below.

If you shoot multiple firearms please be sure to adequately identify the gun in use at this match.

### EQUIPMENT DATA

*Is The Equipment The Same As Used Previously?*  
Yes ( ) No ( ) Same Except Where Listed Below ( )

Cartridge Designation:
Firearm Manufacturer:
Model:
Barrel Manufacturer:
Barrel Length in Inches: _____ Rifling Twist: 1: _____
Any Unusual Throating? YES ( ) NO ( )
If Yes, Specify:
Stock Manufacturer:
Scope Manufacturer:
Scope Power: _____ <i>If Variable Power, List Min. x Max.</i>
Gross Weight of Firearm With Scope: Lbs. _____ Oz. _____

### BULLET DATA

*Is The Bullet Data The Same As Used Previously?*  
Yes ( ) No ( ) Same Except Where Listed Below ( )

Mould Manufacturer:
Mould Design #:
Bullet Weight as Loaded (gr.):
Gas Check: ( ) Plain Base: ( )
In Casting, do you use a ladle? ( ) or bottom pour? ( )
Do you heat treat your bullets? Yes ( ) No ( )
Do you "bump" your bullets? Yes ( ) No ( )
Alloy Used to Cast:
Nose Dia.: _____ Base Dia.: _____
Bullet Lubricant:

### LOAD DATA

*Is The Load Data The Same As Used Previously?*  
Yes ( ) No ( ) Same Except Where Listed Below ( )

Powder Brand and Number:
Powder Charge (gr.):
Primer Brand and Number:
Muzzle Velocity (fps): _____ Est. ( ) Chro. ( )