

S.S.A.A. GROUP MEDAL AWARDSS.S.A.A. Branch _____Award Claimed Silver Gold Ruby DiamondShooters Name _____Postal Address _____Home Address _____Award to be sent to _____Membership Expire Date _____Rifle Details Calibre _____Action _____Barrel _____Scope Brand _____ Power _____Powder Type _____ Weight _____Case _____Primer _____Projectile Brand _____ Weight _____Range Officers Signature _____Date _____Range Officers Signature on face of target, with shooters Name.Send to**S.S.A.A. Awards
M.H.Coady
P.O. Box 221
Crookwell 2583**S.S.A.A. GROUP MEDAL AWARDSS.S.A.A. Branch _____Award Claimed Silver Gold Ruby DiamondShooters Name _____Postal Address _____Home Address _____Award to be sent to _____Membership Expire Date _____Rifle Details Calibre _____Action _____Barrel _____Scope Brand _____ Power _____Powder Type _____ Weight _____Case _____Primer _____Projectile Brand _____ Weight _____Range Officers Signature _____Date _____Range Officers Signature on face of target, with shooters Name.Send to**S.S.A.A. Awards
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