

**HAVE AN UNBEATABLE  
SHOOTING EXPERIENCE AT  
ABILENE  
CLAY SPORTS!**

★ ★ ★  
**THE BEST SPORTING CLAYS  
RANGE IN WEST TEXAS**



**AWARDS FOR TOP  
SHOOTERS AND TEAMS!**

★ ★ ★  
**3 TOP GUN BUCKLES**  
Male, Female, Sub Gauge (28ga. & .410)

**OVERALL CHAMPION TEAM BUCKLES  
&**

**FLAT OF SHELLS FOR THE OVERALL  
SECOND TEAM**

★ ★ ★ ★ ★ ★ ★ ★  
**PLUS GUN BOARDS  
- AND -  
LAPORT MACHINE**

**THANK YOU TO OUR  
EVENT & TEAM SPONSORS**



**COME HAVE A GREAT TIME  
FOR A GOOD CAUSE**



**1 IN 5 SHOOTERS WILL WIN A PRIZE**

**GOLF CARTS AVAILABLE TO RENT FOR \$50  
(PROVIDED FOR \$2500 & \$5000 TEAMS)**



Non-Profit Org  
Bulk Rate  
U.S. Postage  
PAID  
Abilene, Texas  
Permit #642



# TEAM SPONSORSHIP LEVELS



KEEP THIS PAGE FOR YOUR RECORDS

## FLIGHT SCHEDULE

### FLIGHT #1

8:00 am Check-In  
8:30 Safety Briefing  
9:00 Shotgun Start

### FLIGHT #2

10:00am Check-In  
10:30 Safety Briefing  
11:00 Shotgun Start

### FLIGHT #3

12:30pm Check-In  
1:00 Safety Briefing  
1:30 Shotgun Start

Fun Pay for Play Stations for all!

Lunch Provided

**SATURDAY, APRIL 25, 2026**  
ABILENE CLAY SPORTS • 1102 SPUR 707 • ABILENE, TX 79602

PROCEEDS BENEFIT THE  
TEXAS TRAILS COUNCIL, BOYSCOUTS OF AMERICA

SERVING 18 COUNTIES OF WEST CENTRAL TEXAS

THANK YOU FOR YOUR SUPPORT!



# REGISTER TODAY!

Register Online at [TexasTrailsBSA.com](https://www.texas-trails-bsa.com)  
or mail registration form & payment to  
3811 N. 1st, Abilene, TX 79603  
Questions? Mark Conrad at 325.370.7192  
mconrad@scouting.org



Please Check One: ☐ Individual ☐ Corporate

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Work Ph# \_\_\_\_\_ Home Ph# \_\_\_\_\_

Cell Ph# \_\_\_\_\_ Fax# \_\_\_\_\_

Contact Person \_\_\_\_\_

Email \_\_\_\_\_

Do you need a golf cart? ☐ Yes ☐ No

Preferred Flight: ☐ 1 ☐ 2 ☐ 3

## PAYMENT METHOD

Total Amount Due with Entry: \$ \_\_\_\_\_

☐ Check Enclosed Check # \_\_\_\_\_

☐ Credit Card: ☐ VISA ☐ MasterCard ☐ Discover

Name on Card \_\_\_\_\_

Card # \_\_\_\_\_

Exp Date \_\_\_\_\_ Billing ZIP Code \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

List Team Members

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_  
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THANK YOU FOR YOUR SUPPORT