

# 2025 NSCA State Shoot Assistance Grant Application

Club Name: \_\_\_\_\_

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

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

Mailing Address (if different from above): \_\_\_\_\_

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

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

Shoot Manager: \_\_\_\_\_

Host Club Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Host Club Contact Email Address: \_\_\_\_\_

State Association Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Has this club ever hosted a State Championship: Y or N If yes date: \_\_\_\_\_ Attendance: \_\_\_\_\_

Expected attendance for this event: \_\_\_\_\_

Dollar/Donation/Sponsorship amount expected to be raised: \_\_\_\_\_

Does the State Association provide financial assistance for the State Championship? Y or N (circle one)

If so, how much: \_\_\_\_\_

Specifically, how will the Grant be used to improve the shoot quality and attract new participants to the event?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Grant total is a one-time payment of \$2,000 to be used by the club for shoot enhancements. Host club will be required to provide, within 30 days of shoot completion, expense receipts, a report regarding how the Grant Funds were used and the event participation breakdown.

Does Host Club agree to provide receipts? YES / NO (circle one) Representative Initials: \_\_\_\_\_

\_\_\_\_\_  
Club Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
State Association Representative

\_\_\_\_\_  
Date

**Submission deadline is February 28, 2025 at 5:00 p.m. CST. Please submit application to:**

NSCA - Nichole Bowers  
5931 Roft Road  
San Antonio, TX 78253 or  
nbowers@nssa-nsca.com