MARINE CORPS LEAGUE
DEPARTMENT OF PENNSYLVANIA
SERVICE PISTOL MATCH
Fraternal Order of Police DATE: 12 SEP 2026
ARRIVE FOP at 0900

Sign-in begins at 0900, and shooting commences at 1000.

Registration:
Register by filling out the registration form and the two hold harmless agreements attached.

Email the completed registration forms to:

Send Forms to:
Email: fink.b.devin@outlook.com
Mail In To:
Devin Fink
75 Frost Rd, Gardners, PA 17324

MCL Members and Associate Members In Good Standing ONLY or Active duty service members

Range Location:
York County Fraternal Order of Police
Lodge #73 Firearms Range
2933 Access Rd, York, PA 17408

Cost is $30.00 per shooter. Pay at Match

Registration is now open and ends 20 days prior to the match.

Points of Contact:
(Primary) Devin Fink **717-688 9343**
fink.b.devin@outlook.com

(Alt) Jim Schreiber 717-891-8175
willys1948@hotmail.com

Course of Fire:
PAMCL SOP
This is a 60 shot match fired in two stages with each stage containing one string of slow fire, two strings of timed fire and two strings of rapid fire. Be on the range by 0900, match starts at 1000.

- 25 yards to target
- B-8 Targets
- 10 Rounds, 10 minutes Slow Fire, 2 Times for a total of 20 shots
- Two (2) five-round strings, 20 Seconds, Timed Fire, 2 Times for a total of 20 shots
- Two (2) five-round strings, 10 Seconds, Rapid-Fire, 2 Times
- There will be a pause between the Timed and Rapid-Fire strings for reloading.

Match Classifications
Service Pistol & Open Matches: The open pistol match is designed to give shooters access to the Pistol Match who don't have access to a service pistol. Only 22LR, 38Spl, 9mm, 40S&W, 45ACP

Department of PA MCL Awards
Competitors' scores are automatically entered for Department awards.

All competitors are required to read the PA Department Pistol SOP
https://pamcleague.com/marksmanship/

Email completed registration forms to,
fink.b.devin@outlook.com **(Pay at Match)**

General Release Statements

General Liability Statement

In consideration for receiving permission to participate in activities at Fort Indiantown Gap, Pennsylvania (FTIG), I hereby **FULLY RELEASE, FOREVER DISCHARGE, AND AGREE TO HOLD HARMLESS**, for any and all purposes, FTIG, U.S. Army, Department of Defense, Commonwealth of Pennsylvania and their respective officers, servants, agents, volunteers and employees (collectively, the "Released Parties"), of and from any and all liability to me, my personal representatives, assigns, heirs and next of kin, for any damage to or loss of my property, any injury to my person, including death, arising directly or indirectly out of my participation in the activities, **INCLUDING ANY SUCH DAMAGE, LOSS OR INJURY THAT IS CAUSED BY ANY ACT OR OMISSION ON THE PART OF THE RELEASED PARTIES.** I further agree to **INDEMNIFY, DEFEND, AND HOLD HARMLESS** the Released Parties for, from, and against any and all liabilities, damages, claims, lawsuits, costs (including court costs, attorneys' fees and costs of investigation), and actions of any kind or description for any damage to or loss of property or injury to persons, including death, arising out of the activities at FTIG or my participation in the activities, **INCLUDING ANY DAMAGE, LOSS OR INJURY CAUSED BY ANY ACT OR OMISSION ON THE PART OF THE RELEASED PARTIES, INCLUDING ANY NEGLIGENT CONDUCT OF THE RELEASED PARTIES** but excluding any gross negligence or willful misconduct of the Released Parties.

By execution below **I HEREBY ACKNOWLEDGE** that there are inherent risks involved in this Volunteer Program and **I RECOGNIZE AND ASSUME** all of the risks associated with participation in the activities at FTIG. **I ACKNOWLEDGE THAT IT IS IMPORTANT THAT I VERIFY THAT I HAVE INSURANCE COVERAGE WHICH EXTENDS TO ME WHILE PARTICIPATING IN THE ACTIVITIES, AND THAT I SECURE SUCH COVERAGE IF I DO NOT ALREADY HAVE IT**. I understand that FTIG does not provide such coverage, and that no insurance coverage may exist through FTIG to cover any injuries or damages which I may sustain or claims which may arise as a result of my participation in the activities at FTIG.

Important Information

FTIG has been in use by the military for about 77 years. All different types of training occurred all over this land. Finding, stepping or driving on a Unexploded Ordinance (UXO) is possible. You, as the user, must always be alert to your surroundings.

Media Release

I give FTIG the right to use my name, my still photo or video image, or my words (audio or text-based) in any media, for purposes of evaluation, activities, research, promotion, marketing, recruiting, fund raising, exhibits or any other lawful purpose. I waive any right to inspect or approve the use of any hard copy or electronic record that may appear in connection with such use. This release is for worldwide use.

****Privacy Act and Policy***

All participants of activities at FTIG, technical assistance, and exercises are advised that disclosure of a full Social Security Number (SSN) is optional. A participant's SSN or personal information will not be disclosed to any other person(s) without the participant's prior written consent. Personal data is solicited under Authority 10 USC 3012 and Army Regulation (AR) 27-40.

Acknowledgement

I acknowledge and represent that I have read the foregoing, understand it and sign it voluntarily as my free act and deed; no representations or statements have been made to me to induce me to execute this document. I execute this document for full, adequate and complete consideration fully intending to be bound by the same, now and in the future.

Activity: _____

Location(s): _____

Signature: _____ Date: _____ MM/DD/YYYY

Printed Name: _____

Person to notify in case of emergency: _____

Relationship: _____ Telephone or Cell No. with area code: _____

Release And Hold Harmless Agreement

Disclosure of requested information is voluntary, but failure to disclose all or any part of it may result in denial of permission to participate in Pistol Match activities.

PERSONAL DATA:

NAME _____

ADDRESS _____

EMAIL ADDRESS _____

PHONE _____

PERSON TO BE NOTIFIED INCASE OF EMERGENCY

NAME _____

RELATIONSHIP _____

PHONE _____

ADDRESS _____

DECLARATION: In consideration of my participation in the Marine Corps League of Pennsylvania, Inc Pistol Match, I, the undersigned, intending to be legally bound, do hereby waive for myself, parent(s), guardian, executor(s), heir(s), assigns and administrator(s) any and all rights and claims for damages, demands and any other action(s) whatsoever, including those which may be attributable to weather conditions, which I may give against any of the following entities:

A. Department of Pennsylvania Marine Corps League.
B. Any current, past or future member of the Marine Corps League, Board of Trustees.
C. Any current, past or future Officers of the Marine Corps League.
D. Any current, past or future members of the Marine Corps League.
E. Any current, past or future members of Detachment #_____ Marine Corps League.
F. Range Sponsor for this Pistol Shoot _____
G. Any current, past or future members and Officers of the Range Sponsoring the Pistol Shoot Arising out of my participation in this event, including any and all injuries or illnesses suffered by me as a result of my participation in this event or use of any current, past or future Marine Corps League facilities in conjunction with my participation.

This waiver is executed with the awareness that training areas are not designed or maintained with the needs of non-member groups in mind, also that conditions which are potentially hazardous may exist, including, but not limited to obstacles, both natural and man-made, camouflaged as well as visible holes, ditches, trenches and other irregularities in terrain.

SIGNATURE:_____DATE:_____

APPLICANT MUST BE A MEMBER IN GOOD STANDING IN THE MARINE CORPS LEAGUE AND 18 YEARS OF AGE AS OF THE DATE OF THE PISTOL MATCH.