

2027 Copper State Open

Ben Avery Shooting Facility, Phoenix, AZ

February 24th-February 28th 2027

Presented by Clay Busters of Arizona. Inc.



\$4000+ Added Money!!!!

\$10.00 Back to Class in ALL EVENTS

Limited to 100 Participants!!

4 Guns Receive Priority

Mid-Week 2/24 - 2/25 \$65.00/gun			
Rotation		1	2
Wed	12	9:30 AM	11:00 AM
	20	1:30 PM	3:00 PM
Thurs	28	11:00 AM	9:30 AM
	410	3:00 PM	1:30 PM
Rotation Preference		1st choice	2nd choice

****No Deposit required for Mid-Week****

Main Event Doubles 2/26 \$75.00/gun			
Rotation	1	2	3
Fri 2/27	9:30 AM	11:00 AM	12:30 PM
Rotation	1st choice	2nd choice	3rd choice
Preference			
Rotation Preference	1st choice	2nd choice	3rd choice
Main Event			

Main Event 2/26, 2/27, & 2/28 \$75.00/Gun								
Rotation	12 Gauge		20 Gauge		28 gauge		.410 Bore	
1	Friday	2:00 PM	Saturday	10:45 AM	Saturday	3:30 PM	Sunday	12:15 PM
2	Friday	3:30 PM	Saturday	12:15 PM	Sunday	9:15 AM	Sunday	2:00 PM
3	Saturday	9:15 AM	Saturday	2:00 PM	Sunday	10:45 AM	Sunday	3:30 PM

\$50.00 Deposit for Main Event

\$25.00 Deposit for Doubles

No Refunds after February 1st!!!

For RV Information & RV Reservations

Contact BACTC @ 623-434-8119

Mail to: Clay Busters of Arizona

c/o Jean Trapp

5947 Hedgehog Pl.

Phoenix, Az 85083

Contact: Claybustersofarizona@gmail.com

or

Call Mike O'Keefe at: 225-276-8124

Go to: WWW.CLAYBUSTERSAZ.COM for more details
about the Program....Hope to see you in February!!!

Shooters wishing to squad together MUST send in paperwork & deposits together!

Shooter #1: _____

City _____ State _____ Phone _____

Email: _____

NSSA#: _____

Special Notes: _____

Position Preference (circle one): 1 2 3 4 5

Please Visit our Website at: www.claybustersaz.com
for additional information and forms

This Information is required for all squad members!!

Shooter #2 Name: _____

City: _____ State: _____ Phone: _____

Email: _____

NSSA# _____ Position: 1 2 3 4 5

Shooter #3 Name: _____

City: _____ State: _____ Phone: _____

Email: _____

NSSA# _____ Position: 1 2 3 4 5

Shooter #4 Name: _____

City: _____ State: _____ Phone: _____

Email: _____

NSSA# _____ Position: 1 2 3 4 5

Shooter #5 Name: _____

City: _____ State: _____ Phone: _____

Email: _____

NSSA# _____ Position: 1 2 3 4 5