

NRA/USA Shooting Diary

Shotgun

If Found, Please Return To:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

NRA Membership Number: _____

USA Shooting Member Number: _____

ATA Member Number: _____

NSSA/NSCA Member Number: _____

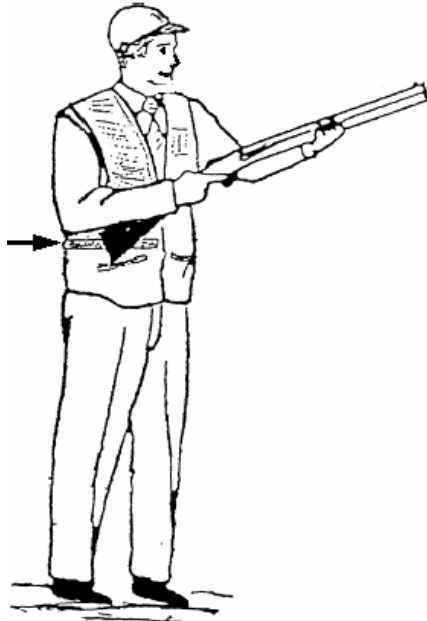
Current Classification

NRA: _____

USA Shooting: _____

ATA: _____

NSSA/NSCA: _____



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I Like A Winner

If you think you'll succeed, you will.

If you think you'll achieve, you do.

If you think in terms of winning, then you'll come
shining through.

If you think you can conquer, you can.

If you think you'll make it, you will find that 80% of
winning comes from a state of mind.

It's not always the fastest one, or the strong woman or
man who is crowned in the race called life:

It's those who think they can.

Perry Tanksley, 1983

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Goal Setting

To be a champion an athlete must have a road map to success. Setting a goal and the milestones to reach the goal is part of the necessary organization required to become a champion. Establishing a goal and the path to reach the goal takes time and some thought. This section will help you organize your thoughts and help you keep your plan in focus.

Make a goal statement that is realistic and performance related. Make your goal something you can do within the next 6 to 12 months. When you have identified your goal, establish a date by which you plan to achieve your goal.

Now it is time to build the road map to accomplishing your goal. A milestone is a task that you need to do in order to meet your goal. You should identify at least four or more milestones that you must accomplish in order to make your goal. When you identify your milestones, establish a date for each milestone completion; be realistic. Ensure that you include mental training, range training physical training and sports study in your plan.

Now that you have a plan, you need to check it regularly. Make sure you note the date that you checked your plan. When you complete a milestone, log it on the "I Did It!" sheet. Reward yourself and write down how you feel.

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My Personal Goal

My goal is to: _____

I will reach my goal by (date): _____

To reach my goal, I must accomplish the following Milestones:		Planned Date to Accomplish
1		By:
2		By:
3		By:
4		By:
5		By:
6		By:
7		By:
8		By:
9		By:
10		By:

I have included the following areas in my milestones:

Mental Training
Range Training

Physical Training
Sports Study

The last time I reviewed my goal and milestones was:

Date:	Date:	Date:	Date:	Date:
Date:	Date:	Date:	Date:	Date:
Date:	Date:	Date:	Date:	Date:
Date:	Date:	Date:	Date:	Date:

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I Did It!

A Record of Milestone Achievement

Completed Milestone	Date Milestone Completed	My Reaction	Today's Date	Personal Best

Notes:

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Training Plan

The training plan is a written “road map” showing how you plan to organize your life during a specific period of time. This road map is designed to take you to your goal. The training plan includes all of the activities affecting your life. You identify these activities and the time that they cost you during the planning time frame. Your plan will show you how much time you will have to use in meeting your milestone.

Athletes use these plans to program their specific training into the other requirements of their daily lives. Training plans can be a weekly plan to a yearly plan, it’s up to individual tastes. Research has proven that athletes who take the time to develop realistic training plans are more successful than those who do not plan.

This section provides you with a yearly calendar to make notes for competitions or other important dates. It also provides you with several weekly training plan forms where you can plan the activities of your week to help organize your time. Use the Weekly Training Plan forms to detail your activities and use the calendar to “see into the future” of your training year.

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Score Charts

We use scores to note the outcome of performance and to track the level of performance. It is fun to note the improvement in our ability over the years. This section provides charts to note the scores in shotgun competitions. Never lose sight that shooting is fun.

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Weekly Training Plan

Week: _____ Milestone that I am working toward this week: _____

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Church							
School							
Community Service							
Work							
Physical Training							
Mental Training							
Range Training							
Sports Study							
Competition							

My goal that this weeks training will help me to accomplish is: _____

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Month

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International Skeet Score Sheet

Date: _____

Location: _____

			Practice
Squad No.	Field No.	Round No.	Competition

Pos No.	Rounds/Name	Score	1			2			3			4			5			6			7		8		TOTAL		
			S	DBLS	L	S	DBLS	L	SGLS	DBLS	L	SGLS	DBLS	L	SGLS	DBLS	L	S	DBLS	L	DBLS	SGLS	L	H			
			H	H	L	H	H	L	H	L	H	L	H	L	H	L	H	L	H	L	L	L	H	L		H	H
1																											
2																											
3																											
4																											
5																											
6																											
			1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25

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American Skeet Score Sheet

Date: _____

Location: _____

Squad No.	Field No.	Round No.	Practice
			Competition

Pos No.	Rounds/Name	Score	1		2				3	4		5	6				7				8		OPT	TOTAL			
			SGL	DBLS	SGL	SGL	SGL	SGL	SGL	SGL	SGL	SGL	SGL	SGL	SGL	SGL	SGL	SGL	SGL	SGL							
			S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S						
				H	L	H	L	H	L	H	L	H	L	L	H	H	L	L	H	H	L						
1																											
2																											
3																											
4																											
5																											
6																											
			1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25

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Trap Score Sheet

Date: _____

Location: _____

Squad No.	Field No.	Round No.	Practice
			Competition

Pos	Rounds/Name	Score	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	TOTAL
1																												
2																												
3																												
4																												
5																												
6																												
			1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	

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International Trap Score Sheet

Date: _____

Location: _____

			Practice
Squad No.	Field No.	Round No.	Competition

Pos No.	Rounds/Name	Score																										TOTAL	
			1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25		
1																													
2																													
3																													
4																													
5																													
6																													
			1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25		

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Target Hits	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25
18																									
17																									
16																									
15																									
14																									
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9																									
8																									
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5																									
4																									
3																									
2																									
1																									
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25

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Performance Evaluation

Performance is more important than the outcome in any competition. If you and your equipment perform well, the score in a competition will take care of itself. The objective of the athlete and the coach should always be on performance. The athlete who performs, even in the most stressful situations, will always be a winner.

It is interesting that most shooting diaries focus on the outcome or scores rather than on performance. Included in this diary is a "Performance Evaluation" form. Where the athlete can evaluate performance and record the evaluation on the "Post Performance Evaluation Chart". Over a period of time these trends may help the athlete recognize periods of the training year that might be changed to help performance. This approach was borrowed from *On the Training of Shooters* by Heinz Reinkemeier.

Using the Performance Evaluation form the athlete will note the date and score. There are four major headings where the athlete can evaluate performance: Mental, Physical, Preparation and Technique. After the competition or practice session, the athlete will evaluate each sub-area and circle a score (1-10) for each area. Make notes on the back of the sheet as needed. Total the score and note it on the bottom of the Performance Evaluation . Divide the total by 2 and plot it on the Post Performance Evaluation Chart. Be sure to write the event and date at the bottom of the chart.

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Performance Evaluation

Mental	Low			Average				Outstanding		
<i>Relaxation</i>	1	2	3	4	5	6	7	8	9	10
<i>Strategy</i>	1	2	3	4	5	6	7	8	9	10
<i>Focus</i>	1	2	3	4	5	6	7	8	9	10
<i>Learn/Fun</i>	1	2	3	4	5	6	7	8	9	10

Physical	Low			Average				Outstanding		
<i>Strength</i>	1	2	3	4	5	6	7	8	9	10
<i>Energy</i>	1	2	3	4	5	6	7	8	9	10
<i>Flexibility</i>	1	2	3	4	5	6	7	8	9	10
<i>Endurance</i>	1	2	3	4	5	6	7	8	9	10

Preparation	Low			Average				Outstanding		
<i>Warm-up-Physical</i>	1	2	3	4	5	6	7	8	9	10
<i>Warm-up-Mental</i>	1	2	3	4	5	6	7	8	9	10
<i>Equipment</i>	1	2	3	4	5	6	7	8	9	10
<i>View of targets</i>	1	2	3	4	5	6	7	8	9	10

Technique	Low			Average				Outstanding		
<i>Feet position</i>	1	2	3	4	5	6	7	8	9	10
<i>Mounting the gun</i>	1	2	3	4	5	6	7	8	9	10
<i>Hold point</i>	1	2	3	4	5	6	7	8	9	10
<i>Focus point</i>	1	2	3	4	5	6	7	8	9	10
<i>Seeing the target</i>	1	2	3	4	5	6	7	8	9	10
<i>Movement</i>	1	2	3	4	5	6	7	8	9	10
<i>Trigger</i>	1	2	3	4	5	6	7	8	9	10
<i>Follow-through</i>	1	2	3	4	5	6	7	8	9	10

Total Performance Score

Divide by 2

Comments:

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Data Sheet

Location _____ Date _____

Time _____

Weather _____

Light _____

Wind _____

Mental Conditions/Factors _____

Physical Condition/Factors _____

Food & Drink _____

Firearm Make _____ Type _____

Ammo- Shell Brand/Type _____

Shot _____ Weight _____

Powder _____ Weight _____

Primer _____ Wad _____

Accessories/Clothing _____

Summary Comments _____

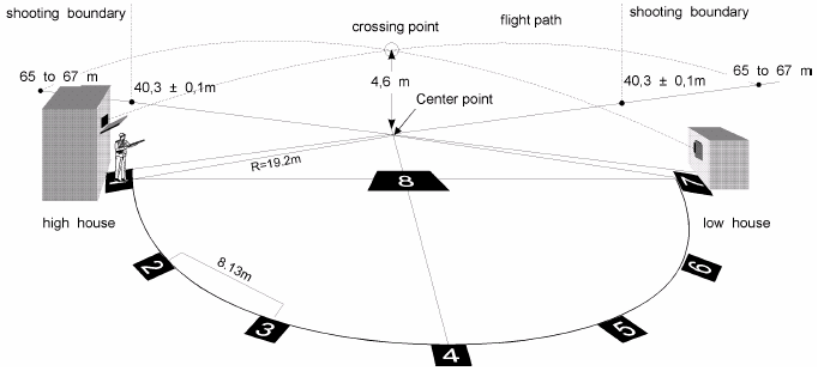
Plans for next Training Session _____

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International Skeet																	Total				
R o u n d	1			2			3			4		5		6		7		8			
	SGL	DBLS	SGL	SGL	DBLS	SGL	SGLS	DBLS	SGLS	SGLS	DBLS	SGL	DBLS	SGL	DBLS	SGLS		SGLS	DBLS		
	H	H	L	H	H	L	H	L	H	L	H	L	H	L	L	H		L	L	H	L
1																					
2																					
3																					
4																					
5																					
6																					

R o u n d s	H		L		H		L		H		L		H		L		H		L		H		L		Total								
	SGLS		DBLS		SGLS		DBLS		SGLS		SGLS		SGLS		DBLS		SGLS		DBLS		SGLS		OPT										
	1				2				3				4				5				6					7				8			
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24		25							
American Skeet																																	



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Range Notes

One of the most valuable aspects of the diary is that it provides historic information on past problems, solutions or special conditions. This section provides the athlete with information on shooting ranges that may be useful in the future. It allows athletes to make notes on the competitive environment.

First, the “Range Notes” form provides a place to record the name, location and directions to the range. Noting the travel time is an important planning tool.

Note specific range items such as the number of fields, shooting station information, lighting features, background vegetation, etc. Pay attention to any special features that may affect performance and note these items in “Special Range Notes.”

Make observations of prevailing wind, light direction at different times of the day. Time of year also makes a difference creating shadows in the spring that will not be there in the summer.

On the reverse, draw any special features like trees, berms and/or buildings. Draw an arrow indicating North and note the direction the range is facing. This will help determine the direction and angle of the light. This note will be especially important to you if you shoot on this particular range only occasionally.

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Range Notes

Name of Range:

Location:

Directions to Range:

Travel Time: _____ Hours _____ Minutes From _____

Range:

Number of Fields:

Sloped	Level		
Sun Protection		Gun Rack	
Club House		Drinks	Food

Range Conditions

Sun:	Dim	Average	Bright
Background:	Poor	Average	Excellent
Wind:	Direction		Speed

Special Range Notes:

Time of year: Spring Summer Fall Winter

Light Direction Background

Prevailing Wind Brightness

Lens Color for Best Clarity of Target

Notes:

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Checklists

Checklists are extremely valuable to the competitive shooter. They give a reference point or baseline where an athlete can return to after a long layoff or in the process of problem solving . Everyone needs a checklist to remember equipment setup or what items to bring for a competition. Junior shooters need to change checklists as they grow and mature in the sport. Advanced shooters may use them less frequently, but will use checklists for reference.

This section is designed for the athlete to place individual checklists or use the checklists provided. These provide a place to note specific settings for each gun. When changes are made the athlete should change the entries.

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Gun Fit

Make of Gun: _____

Model: _____

Height of Rib: _____

Length of Pull: _____

Pitch: _____

Cast: _____

Drop at comb

Front of Comb: _____

Rear of Comb: _____

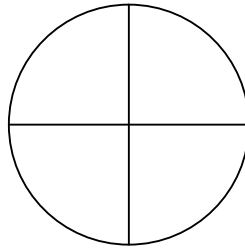
Shot Pattern:

% High: _____

% Low: _____

% Right: _____

% Left: _____



Choke: _____

Changes to Gun for

Fit: _____

Results of Changes: _____

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Problem Solving

All athletes experience problems with their performances or equipment at some time or other in their shooting career. Some athletes solve a problem only to have the same thing reappear years later. Those athletes who are wise enough to have made notes on how they solved the problem are able to review their notes and easily fix the situation. Those athletes who are not wise enough to make notes are doomed to the frustration of repeating the learning process again. This section provides the athlete with a form to help guide and note the progress of problem solving.

Problem solving starts with a statement of the problem. This statement may be difficult to develop because sometimes we are not sure of or understand “the problem”. Sometimes this is hazy until all of the facts and assumptions are identified. The athlete must take the time to analyze the situation and review all the facts and assumptions. Write down several statements which you think define the problem. Make your statements as short as possible. When you think you have a good problem definition, write it on the form.

Next write down all the facts (something you can prove) that you know have something to do with the problem. Make a list.

Now identify any assumptions. An assumption is something that you take to be true without proof or demonstration. Make a list of your assumptions.

When you have a good problem statement, and a list of facts and assumptions, you are ready to try a solution. Write the solution you will try as a statement. Write down your results when you have demonstrated the outcome. If you have solved your problem then you are finished and have now documented the process adequately. If the solution does not work, then you have documentation and do not need to repeat the process. You can go on until you have found a solution that works.

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Problem Solving

Positive Statement of the Problem:

Known Facts:

Assumptions:

Solutions:

Problem Solution #1:

Outcome:

Solutions:

Problem Solution #2:

Outcome:

Solutions:

Problem Solution #3:

Outcome:

Solutions:

Problem Solution #4:

Outcome:

Solutions:

Problem Solution #5:

Outcome:

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Address and Phone Directory

Name: Company: Address: City: State: Zip: Phone: Fax: Email:	Name: Company: Address: City: State: Zip: Phone: Fax: Email:
Name: Company: Address: City: State: Zip: Phone: Fax: Email:	Name: Company: Address: City: State: Zip: Phone: Fax: Email:
Name: Company: Address: City: State: Zip: Phone: Fax: Email:	Name: Company: Address: City: State: Zip: Phone: Fax: Email:
Name: Company: Address: City: State: Zip: Phone: Fax: Email:	Name: Company: Address: City: State: Zip: Phone: Fax: Email:
Name: Company: Address: City: State: Zip: Phone: Fax: Email:	Name: Company: Address: City: State: Zip: Phone: Fax: Email:
Name: Company: Address: City: State: Zip: Phone: Fax: Email:	Name: Company: Address: City: State: Zip: Phone: Fax: Email:
Name: Company: Address: City: State: Zip: Phone: Fax: Email:	Name: Company: Address: City: State: Zip: Phone: Fax: Email:

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Name: Company: Address: City: State: Zip: Phone: Fax: Email:	Name: Company: Address: City: State: Zip: Phone: Fax: Email:
Name: Company: Address: City: State: Zip: Phone: Fax: Email:	Name: Company: Address: City: State: Zip: Phone: Fax: Email:
Name: Company: Address: City: State: Zip: Phone: Fax: Email:	Name: Company: Address: City: State: Zip: Phone: Fax: Email:
Name: Company: Address: City: State: Zip: Phone: Fax: Email:	Name: Company: Address: City: State: Zip: Phone: Fax: Email:
Name: Company: Address: City: State: Zip: Phone: Fax: Email:	Name: Company: Address: City: State: Zip: Phone: Fax: Email:
Name: Company: Address: City: State: Zip: Phone: Fax: Email:	Name: Company: Address: City: State: Zip: Phone: Fax: Email:
Name: Company: Address: City: State: Zip: Phone: Fax: Email:	Name: Company: Address: City: State: Zip: Phone: Fax: Email:
Name: Company: Address: City: State: Zip: Phone: Fax: Email:	Name: Company: Address: City: State: Zip: Phone: Fax: Email:

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