Sydney Olympic Park Archers

# Membership Application

**Applicant Details** **Archery NSW No.:** _____

Title/s: _____

First Name/s: _____ Last Name: _____

Date of Birth: _____ / _____ / _____
dd mm yyyy

Postal Address: _____

_____ Postcode: _____

Home Phone: ( _____ ) _____

Mobile: _____

Work Phone: ( _____ ) _____

Email Address: _____

**Membership Type** (please select one):

Junior (under 18): ☐ Adult (18+): ☐ Family: ☐

**Bow Type/s:**

Recurve: ☐ Compound: ☐ Barebow: ☐ Crossbow: ☐

**Membership Requirements:**

I wish to apply for membership of Sydney Olympic Park Archers implying affiliation with the Archery Society of New South Wales and Archery Australia. I have previously been a member of, or have undertaken and completed a beginners course at this club:

Club Name: _____ Date: _____ / _____ / _____
dd mm yyyy

**Agreement:**

I understand and agree to abide by the rules of the association. Membership is renewable annually on 1 July and annual fees are subject to variation.

Signature: _____ Date: _____ / _____ / _____
dd mm yyyy

**Guardian** (if applicant under 18):

If the applicant is under 18 years of age authorisation from a Parent or Guardian is required.

Name: _____

Signature: _____ Date: _____ / _____ / _____
dd mm yyyy