



## Application to join Fox Archers as an Associate Member

Title..... First Name..... Surname.....

Address.....

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Postcode..... Telephone.....

Mobile..... Email.....

Date of Birth.....

Please note under 18s must be accompanied by an adult or guardian.

Please list any disabilities, injuries, learning or medical conditions below. (This information will be treated in strictest confidence and will be used by the club to accommodate individual needs).

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GNAS Number.....

Please give details of any previous club and archery experience.....

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Please list the bow types you usually shoot.....

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Cheques should be made payable to 'Fox Archers'.

Contact [info@foxarchers.co.uk](mailto:info@foxarchers.co.uk) for further information.

<http://www.foxarchers.co.uk>