ARCHERY
REGISTRATION FORM 2023
Term 2

Name:	DOB: AGE:
Parent/Guardian/Emergency contact details	
Name:	Address:
Phone:	Email:
Signature:	
Is there any medical details/information we need to know about? (Allergies, injuries, medical conditions)	

Cost: $100 per term upfront or $15 per casual visit
Active Kids Vouchers accepted

Date:	Paid: Cash / Card / AKV / A/C Credit	Staff: