



Bega Valley Archers Inc.

APPLICATION FOR MEMBERSHIP 2019/20

An application form is to be completed for each individual applicant. In the case of minors seeking membership, the application should be signed by a parent or guardian.

Full name:..... **D.O.B**

Address: **Post Code**.....

Phone () **Mobile**

Email:

Have you any **archery experience YES/NO**. Name of club

What **type of bow** do you favour e.g. Recurve, Asiatic, Longbow, other

What **type of archery** are you interested in e.g. Target, Field Archery, Hunting, other.....

Membership: Individual (Senior)- **\$30**, Junior- **\$20** (17 and under)

Contact in case of emergency:

Name:..... **Phone:**.....

I hereby apply to become a member of **Bega Valley Archers Inc.** I understand that as a member participating in archery activities I must also join and remain a current member of the BVA's peak body, **Traditional Archery Australia (TAA)**. In the event of my admission as a member, I agree to be bound by the BVA Inc. Constitution and if completing this application on behalf of a minor under the age of 13 years, I agree to provide supervision.

.....Date:.....

(Signature of applicant or applicant's parent/guardian)

Proposed by:.....Signature.....Date.....

(A current member of BVA Inc. must nominate the applicant for membership)

Seconder:Signature.....Date.....

Return to: The Bega Valley Archers Inc., PO Box 3218 Bemboka NSW 2550

Further Info: Phone: 02 6493 0415 Mobile: 0459 930 415 or Email: begaarcher@gmail.com