



APPLICATION FOR MEMBERSHIP/COACHING

Please include clubsecretary@pinesparkarchers.org.uk in your address book

Circle as applicable

Name:		Date of Birth		NFAS no.		Coach/Join	
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Address:	
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Postcode:		Home tel:		Mobile:	
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This information is required by the forestry commission for security purposes/parking permit**

Email: @		Car Registration(s)**	1	2
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Family/Groups residing at the same address

Name:		Date of Birth		NFAS no.		Coach/Join	
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Name:		Date of Birth		NFAS no.		Coach/Join	
Name:		Date of Birth		NFAS no.		Coach/Join	

If address is different from above

Address:	
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New Archers /Coaching

A six hour initial course (3x2hour sessions) will be provide at the **cost of £10 per person**. After which you may apply for full Club Membership, where upon yearly fees will be applicable. **For insurance purposes, you will be required to join the NFAS - National Field Archery Society via the club during your 2nd Coaching session**. If you wish to use the club equipment after this period, then a charge of £3 will be levied for each use, this is to cover wear and tear and lost arrows.

Membership Agreement:

I give permission for personal details to be held on computer, and the use of photo's to be used for Club purposes only ie: to promote club/sport*.

I undertake as a member to assist with the maintenance of the club facilities and the setting up of Club activities such as Open Shoots or 'Have a Go' days.

The Committee reserves the right to terminate membership of the group in certain circumstances, ie: Considered under the influence of Alcohol.

Membership fees will be due annually 1st April

I hereby agree to abide by the Terms and Conditions set out above and in the Club Constitution

*Signature: _____	Date: _____
*Signature: _____	Date: _____
*Signature: _____	Date: _____

* ADULT OVER 16

Yearly Fees: 2018/2019 (April to March) Please make cheque's payable to PINES PARK ARCHERY CLUB

ADULT **£35.00** JUNIOR (under 16) **£ 15.00** FAMILY GROUP **£70.00** (This is for 2 adults and up to 3 children)

Cheque / Cash	Insurance via CLUB/Direct	Payment Received by	Date:
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Along with membership fees please provide **proof of current year NFAS Membership** (if already applied/member)

Preferable please take out INSURANCE via Club to assist Admin, & make cheque's payable to **NFAS**

Office use 2018/2019 Amount :

Cheque / Cash	Insurance via CLUB/Direct	Payment Received by	Date:
Family Name:		NO. + (under16)	NFAS Taken.
Address:			