



**READING ARCHERY CLUB  
Membership Application**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

Sponsored By: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Archery Interests (Check All that Apply)**

Indoor Target  Outdoor Target  3D Target  Field  Hunting  JOAD

Other: \_\_\_\_\_

**Archery Organization You Belong To:**

NAA  NFAA  IBO  ASA  PSAA  PFATA  UBP  IAA  OTHER \_\_\_\_\_

**Membership Type:**  Individual  Family  Senior (60+)  Junior (Under 18 with Parental Consent)

**Where you ever a member before?**  Yes  No

**If Family - Please Fill in Family Names Below:** *(If need more room you can use the back of this application)*

Name	Relationship	Date of Birth

**FEE SCHEDULE AS FOLLOWED:**

Name of Fee	Fee
<input type="checkbox"/> Individual ( <b>\$45</b> ) <input type="checkbox"/> Family ( <b>\$65</b> ) <input type="checkbox"/> Senior (60+) ( <b>\$25</b> ) <input type="checkbox"/> Junior (under 18) ( <b>\$20</b> )	
<input type="checkbox"/> New Non-Military Member (\$10 initiation fee + \$10 fob fee) ( <b>\$20</b> )	
<input type="checkbox"/> New Military Member (\$10 fob fee) ( <b>\$10</b> )	
<input type="checkbox"/> Unlimited Annual Indoor Range Pass ( <b>\$50</b> )	
<b>Total</b>	

(Note: College Students may remain Junior Members with Student ID)

Please Mail your **COMPLETED APPLICATION** and check made payable to **READING ARCHERY CLUB**

**Mail Completed Application & Check to:** *Reading Archery Club, PO Box 122, Shillington, PA 19607*

Your application will be processed as soon as possible and an electronic key fob issued after your application is approved on the first Monday Meeting. You will have to come to the Meeting to pick up your key fob, it will not be mailed out. You may also bring your application and check to any club function (Shoot or Membership Meeting). Membership meetings are held the first Monday of each month. Your membership is valid for One Year.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

