

**KuRingGai Bowmen Inc.**

## **Beginner's Course Application Form**



Mr / Mrs / Mss / Miss

Surname: \_\_\_\_\_

Given Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Postcode: \_\_\_\_\_

Birthdate: D(\_\_\_\_) M(\_\_\_\_) Y(\_\_\_\_)

Telephone Numbers:

Home: (\_\_\_\_) \_\_\_\_\_

Business: (\_\_\_\_) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

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

I wish to undertake the beginners course in archery with KuRingGai Bowmen Inc. I understand that the current cost of a beginners course is \$85.00 and agree to payment in full before the start of the course. I will abide by all of the safety instructions that will be given to me during the running of the course.

Signed: \_\_\_\_\_

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

If the applicant is a junior (ie. under 18 years of age) we require a Parent or Guardian's authorisation:

Parent / Guardian Name: \_\_\_\_\_

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

Note: If the applicant is under 12 years of age we require a Parent or Guardian to be in attendance at all times.

Optional and confidential: To help us to prepare for any possible medical emergency, do you have a medical condition that you feel we should know about or that may or may not effect your physical abilities:

\_\_\_\_\_

\_\_\_\_\_

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Administration use only

Date received: \_\_\_\_\_

Amount Paid: \_\_\_\_\_

Treasurer: \_\_\_\_\_ Date: \_\_\_\_\_