



# SUNSHINE COAST BOWMEN inc. ARCHERY COURSE

Please use Block Letters to complete the form

CONFIDENTIAL

APPLICATION DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

I, \_\_\_\_\_ ( Full Name) M/F \_\_\_\_\_

OF \_\_\_\_\_

SUBURB / TOWN \_\_\_\_\_ POSTCODE \_\_\_\_\_

MOBILE \_\_\_\_\_ 2nd MOBILE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

AGE \_\_\_\_\_

### Other Persons

FULL NAME	M/F	AGE

I, the undersigned, am prepared to accept responsibility for any of the above applicants under the age of 18yrs, until they attain such age.

Parent / Guardian \_\_\_\_\_

I Do hereby wish to attend a Archery Proficiency course at Sunshine Coast Bowmen Inc, and I have read, Understood and agree to abide by the Club Rules and all instruction given by the instructor. I agree that images taken of me can be used by SCB for social media and publicity purposes.

I certify the information is correct: \_\_\_\_\_

Signature of applicant

Total Fee Payable \$ \_\_\_\_\_

Paid \$ \_\_\_\_\_

Balance Due \$ \_\_\_\_\_

### COACHING FEES:

ADULT \_\_\_\_\_ \$50 each

CHILD \_\_\_\_\_ \$50 first Child Under 15years

EXTRA CHILD \_\_\_\_\_ \$30 each

FAMILY 4+ \_\_\_\_\_ \$150.

Fee's are payable in cash before the start of the course.

Office Use Only

Name \_\_\_\_\_ Date \_\_\_\_\_ Fee \$ \_\_\_\_\_