

NORTHERN COUNTIES ARCHERY SOCIETY

OFFICIAL NORTHERN COUNTIES RECORD CLAIM FORM



ARCHER'S DETAILS

NAME: _____

JUNIOR GIRL _____ JUNIOR BOY _____ D.O.B: _____

RECURVE _____ COMPOUND _____ LONGBOW _____ BAREBOW _____

CONTACT DETAILS:

E-MAIL _____

TEL: _____

CLUB: _____

G.N.A.S No: _____

DETAILS OF RECORD CLAIM

FULL NAME OF TOURNAMENT: _____

ROUND _____

SCORE _____

DATE _____

VENUE: _____

COMPETITION STATUS _____

All claims must be accompanied with results sheets, Please send Completed Forms to:

Ms Louise Smith archery.louise@gmail.com