

Beginning Archery Class Registration Form

Contact jvlbowmenarchery@gmail.com or call Robin Anderson at 608-774-5048

	Must be 8 Years Old					
Name	Age (if under 18)					
Address						
City		State	Zip			
Phone ()		email				
Prior archery experience?	Yes N	lo (Cir	rcle what applies)			
If yes, circle level:	Limited (I know very little)	Moderate (I	understand arch	nery basics)		
Please circle your preferd Mor	nth and Session. January	February	March	Morning o	r Aftnoon	
January Schedule: Saturday, January 5th 10:00 am – 12:00 pm OR 12:30 pm – 2:30 pm Session 1 of 3 Saturday, *January 19th 10:00 am – 12:00 pm OR 12:30 pm – 2:30 pm Session 2 of 3 Saturday, January 26th 10:00 am – 12:00 pm OR 12:30 pm – 2:30 pm Session 3 of 3 February Schedule: Saturday, February 9th 10:00 am – 12:00 pm OR 12:30 pm – 2:30 pm Session 1 of 3 Saturday, February 16th 10:00 am – 12:00 pm OR 12:30 pm – 2:30 pm Session 2 of 3 Saturday, February 23rd 10:00 am – 12:00 pm OR 12:30 pm – 2:30 pm Session 3 of 3 March Schedule: Saturday, March 30th 10:00 am – 12:00 pm OR 12:30 pm – 2:30 pm Session 1 of 3 Saturday, April 6th 10:00 am – 12:00 pm OR 12:30 pm – 2:30 pm Session 2 of 3 Saturday, April 13th 10:00 am – 12:00 pm OR 12:30 pm – 2:30 pm Session 3 of 3 *one Saturday is skipped in January due to a conflicting activity at the club.						
Parent/Guardian consent: I give permission to participate in this program for new archers. I agree to stay at the Janesville Bowmen clubhouse for the duration of each class and understand that we participate at our own risk.						
Parent/Guardian signature			Date			
To register, fill out this form and mail or go to http://www.ci.janesville.wi.us/government/departments-divisions/neighborhood-and-community-services/recreation-division and click on Register Now.						
Total Fee for a 3 class sess	-		for club use		Check #	

(payment required with registration) Classes take place at Janesville Bowmen, Inc. Club 5119 N Fox Rd., Janesville, WI 53548 http://janesvillebowmen.tripod.com

for club use only: CashCheck #
Amount received: §
Instructor initials:
DATE: AM PM