



Archery Alberta (ATAA) Club Application Form

Whether you are applying as a new club member or renewing your membership, please ensure you fill out this form entirely every year. This will ensure that the ATAA has the most current information on your club for statistical information required by funders and in acquiring club member insurance coverage.

Club Application Form

| | |
|--|----------|
| Club Name: | |
| Mailing Address | |
| Street Address | |
| City, Province, Postal Code | |
| Contact Person | |
| Contact Telephone Number | |
| Contact E-mail | |
| Alternate E-Mail Address | |
| New or Renewal | |
| Club Website | |
| Does your club wish to be updated on ATAA Shoots and activities? (Information will be emailed to your Club Contact Person identified above) | Yes / No |

Club Membership Profile

| Membership | Male / Female | Total |
|--|---|-------|
| Our Club promotes: | 3D / Target / Field / Other | |
| Club Activities: | Individual recreation / Family recreation / Training / Lessons / Coaching / Tournaments / Other | |
| Types of Bows (Traditional, Compound, Recurve) | | |
| Do you hold Tournaments? | | |
| Are Guests Permitted? | | |
| Do you have a Junior Program? / Leaders Name | | |
| Total numbers of juniors in club: | | |
| Total number of disabled archers: | | |

Club Facility Profile

| | |
|--|--|
| Address and/or directions to Range | |
| Outdoor Range (Y/N) | |
| 3 D Course (Y/N) | |
| Target Range (Y/N) | |
| Field Course (Y/N) | |
| Indoor Range (Y/N) | |
| Camping Available? | |
| Are your facilities accessible for individuals who are disabled? (please describe) | |



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Club Executive Profile

If your executive officers change during the year please send us the updates using this form and indicating the changes.

| | |
|--|--|
| President - (Name / Contact Number / Email) | |
| Vice President - (Name / Contact Number / Email) | |
| Secretary - (Name / Contact Number / Email) | |
| Treasurer - (Name / Contact Number / Email) | |
| Membership - (Name / Contact Number / Email) | |
| Other Exec. - (Name / Contact Number / Email) | |
| (Name / Contact Number / Email) | |
| (Name / Contact Number / Email) | |
| Date of Annual General Meeting | |

Club Coaching Profile

| | |
|---|------------------------|
| Name | Town/City of residence |
| Archery coaching certification & years of coaching experience | Email |
| Name | Town/City of residence |
| Archery coaching certification & years of coaching experience | Email |
| Name | Town/City of residence |
| Archery coaching certification & years of coaching experience | Email |

Club Judge / Safety Range Officer Profile

| | |
|---------------------------------------|--|
| Name / Range Officer or Judge / Email | |
| Name / Range Officer or Judge / Email | |
| Name / Range Officer or Judge / Email | |

If you have more information you would like to supply such as additional coaches, judges, etc. please include on a separate sheet. By listing the names and emails above, these individuals are allowing the ATAA to contact them directly regarding relevant training clinics, courses, updates and activities related to the work of the ATAA.

Please enclose a copy of this form, your fees (cheque or money order) and send to:

Archery Alberta (ATAA) Membership Co-ordinator - Jude Hooey
2718 - 20 Avenue South, Lethbridge, AB, T1K 1G7

Email: membership@archeryalbera.ca

Office Use Only:

Club Number: _____ Zone 1 2 3 4 5 6 7 8 New Membership _____ Renewal _____