

HNS Archery Indoor Season Opener Star Fita Tournament

11250 Patterson Avenue, Henrico, VA 23238

Saturday October 22 & Sunday Oct. 23, 2016

This is a USA Archery Sanctioned Event

Divisions: Compound, Recurve, Barebow Age Classes: Seniors, Masters, Juniors, Cadets, Cubs, Bowman

Competition Round: 60 Arrows at 40cm face target at 18 meters (20 ends of 3 arrows)

Times: Saturday 9:am or 1:00PM Sunday 1PM

FEES: Individual \$35 Late Registration \$10 additional per person if space is available.

Registration Deadline: Both completed form & payment received by October 19, 2016.

USA Archery dress code will be in effect- For any USA Archery tournament, it is necessary to look neat and professional. Closed toe shoes, no sweats, No Camo, no jeans, no overly baggy clothes, no muscle shirts, etc. Clothing must cover midriff when at full draw. Skirts and shorts must be fingertip length when standing naturally with hand to sides.

HNS Archery Indoor Opener Star Fita Tournament

USA Archery Member # _____ Must have valid USA Archery membership.

Name _____ Date of Birth _____

Street _____

City, State, _____ ZIP _____ Phone _____

Email (please print) _____

Must have email to register for this shoot. (If you have an Archeryevents.com account use the same email you used to register on that site.)

Entries will be entered on archeryevents.com under this events page.

Male Female

Compound

Recurve/Olympic

Barebow/Recurve

Preferred Shoot time:

Sat 9am ___ 1pm ___

Sun 10am ___

Shoot times are first come first served. If we cannot accommodate your preferred times we will notify you by email and or telephone.

Juniors (18-20*)

Cadet (15-17*)

Cub (13-14*)

Bowman (up to 12*)

Seniors (any age)

Masters (50+)

* Youth age: The age you are on December 31st 2016 is the group you shoot.

Target Choice: 40cm 10 Ring 3 Spot Vegas

All Compound shooters will use Inner 10 Scoring Ring. Barebow and Recurve will use Outer 10 Scoring.

All shooters will shoot choice of 40cm or Vegas target from 18 Meters.

Visa Mastercard Discover AMEX (4 digit code) _ _ _ _

Card # _____

Exp Date ___/___ CCV# _ _ _

Address above must match billing address for card, include Zip code

Authorized Signature _____

Fee Enclosed: \$ _____ **Registration**

Donation For Judge _____

Practice Range Pass _____ (optional \$3)

Total \$ _____

Make checks payable to:
HNS Archery JOAD Club
11250 Patterson Ave,
Henrico, VA 23238