

For ADMIN Use ONLY

Cash

Cheque

Niagara Falls Archery Club Application for Membership 2024

Adult
18 yrs & Over
\$150/yr

Youth
9 yrs to 17yrs
\$75/yr

Family
Up to 3 members (max 2 adults)
\$225/yr

Primary Member Information (PLEASE PRINT CLEARLY)

Name: _____ Gender: _____

Email: _____ Date of Birth: _____ YYYY / MM / DD

Address _____ City _____ Prov. _____ Postal Code _____

FAMILY MEMBERSHIPS

Additional Family Members (Living in the same household)

Name: _____ Gender: _____

Email: _____ Optional _____ Date of Birth: _____ YYYY / MM / DD

Name: _____ Gender: _____

Email: _____ Optional _____ Date of Birth: _____ YYYY / MM / DD

I hereby apply for membership to The Niagara Falls Archery Club and upon acceptance; I agree to observe all the Club Rules and Regulations and to respect the Club, the Club's members, and the Club's guests. Any infraction of these rules may result in the cancellation of my membership and revocation of all privileges associated with my membership.

I hereby release and forever discharge The Niagara Falls Archery Club, it's members and guests from any and all actions, causes of action, claims and demands, loss or injury, howsoever arising, which may hereafter be sustained by me in consequences of my membership in the Club. In particular, I agree that the Club and its members shall not be responsible for any loss or theft of my personal possessions while using the Club premises.

NOTE: If the applicant(s) is/are under the age of 18 years, the applicant's legal guardian must read and sign the release below before membership is accepted.

Signature: _____ Date: _____ YYYY / MM / DD
(of parent or legal guardian if applicant is under 18 years of age)

Mailing Information: (Do Not Mail Cash)

Cheques to be paid to the order of **The Niagara Falls Archery Club** and mailed to **6531 Murray Street, Niagara Falls, ON, L2G 2K8.**

In-Person Drop-Off: (Cash Accepted)

Cash & Cheques will be received at the club every Tuesday evenings between 5:00pm-7:30pm.