

2018 Application / Registration Form



2018 Archers' Crest Elite

Archers' Crest Olympic Training, LLC.

3175 Traver Drive

Broomfield, Colorado 80023

303.949.5640

ace@archerscrest.com

www.archerscrest.com

Archer Name: _____ Birthdate: ____/____/____

Parents Name: _____

USA Archery #: _____ Expiration Date: ____/____/____

USA Archery Club Affiliation: _____

Athlete Address: _____

City / State: _____ ZIP: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

2017 USA Archery Ranking: # _____

Category: Recurve _____ Compound _____

Gender: Male _____ Female _____

Division: Senior _____ Junior _____ Cadet _____ Cub _____

Archer Qualifying Scores:

<u>Qualifier</u>	<u>Recurve Score</u>		<u>Compound Score</u>	
	<u>Men</u>	<u>Women</u>	<u>Men</u>	<u>Women</u>
USA Indoor Round	_____	_____	_____	_____
USA Outdoor Round	_____	_____	_____	_____

Date scores were shot: _____

Division and Distance shot: _____

Name of Tournament: _____

Location of Tournament: _____

Athlete Interview Date & Time: _____

Signature of Applicant

Date _____

Signature of Parent or Guardian for Minor

Date _____

Signature of ACE Coach

Date _____

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For Office Use:

Archer Name: _____

Date Interview completed: _____

Approved: _____

Disapproved: _____

Comments:

Signature of Program Director: _____ Date: _____

Email Application to:
Archers' Crest Elite
ace@archerscrest.com
Mobile: 303.949.5640

Make check payable to: Archers Crest or Teresa Perrego



Also, visit www.archerscrest.com