

FLORIDA 4-H ARCHERY MATCH
SENIOR REGISTRATION FORM

County _____ 4-H Agent's Name _____
Phone _____ E-mail _____

Name of 4-H Club, 4-H Archery Club, 4-H Shooting Sports Club, or County 4-H
Shooting Sports Program _____
Certified Florida 4-H Archery Instructor's Name _____

ARCHERY - SENIOR INDIVIDUAL PARTICIPANTS

(Age 14 and Older as of January 1, 2010)

- Division 9- Senior Instinctive Long or Recurve Bow
- Division 10- Senior Sighted Long or Recurve Bow
- Division 11- Senior Instinctive Compound
- Division 12- Senior Sighted Compound

<u>Archer's Name</u>	<u>Division (9, 10, 11 or 12)</u>
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ARCHERY-SENIOR TEAM MEMBERS

Archer's Name

Division (9, 10, 11 or 12)

1-	_____	_____
2-	_____	_____
3-	_____	_____
4-	_____	_____

1-	_____	_____
2-	_____	_____
3-	_____	_____
4-	_____	_____

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