

NEW CASTLE 100 ARCHERS

Membership Application

All fields are mandatory in order to process the application and must include all applicable fees.

Full Name _____ Phone (Home): _____
Address: _____ Phone (Cell): _____
City: _____ State: _____ Zip: _____
E-Mail: _____

Immediate Family to be Club Members:

Employer: _____ Emergency Contact: _____
Occupation: _____ Emergency Phone: _____

Please list any other skills or trades that may be useful to the club (Carpentry, Plumbing, Welding, Law, Tax Prep, Web Design):

Prior Member: _____ Disabled Archer: _____ Archery Experience: _____ Date of Birth: _____
 Yes No Yes No Beginner Intermediate Veteran _____

I attest that I have reviewed
the Constitution of the club
and agree to fully comply with
its terms and conditions:

Initials

I agree to provide at least the minimum
amount of work hours required to fulfill the
obligations of my membership each year
or agree to pay \$20 for each hour owed:

Initials

I agree to pay the club \$10 in the event I
lose or damage my electronic door key, or
if I fail to return the electronic door key
upon expiration of my club membership:

Initials

I attest the above information is correct to the best of my knowledge: _____ Sign

Office Use Only:

Membership Type: _____
Membership Fee Rcv'd: _____ Initiation Fee Rcv'd: _____
Date of Meeting Vote: _____ Date: _____

Signatures of NC100 Sponsoring Members:

President
Paul Stoecker
Phone: 302.379.3375

www.nc100archers.com (302) 722-7997
Physical Address: 2272 Sunset Lake Rd., Newark, DE 19702
Mailing Address: 389 Thornton Road, Middletown, DE 19709

Membership Secretary
Mike Hardiman
Phone: 302.898.8759