

Individual Registration Form

Use this form if mailing registration.



Name: _____

Address: _____

City: _____

State: _____ ZIP _____ Country _____

Country of citizenship: _____

Phone #: _____

E-MAIL: _____

(email is the primary way we will communicate with you, so please make sure it is correct and legible, thanks)

Member of USA Archery exp. _____

Member of NFAA exp. _____

Membership is required in USA Archery or the NFAA or for non-USA participants, a FITA Member Organization.

Please do not write in this box.	
Date received:	
Amount received:	
Check No:	
Waiver included:	
Amount due:	

OFFICIAL CATEGORIES: (Please check one category) A registered list will be maintained on the website.

Recurve Men <input type="checkbox"/>	Recurve Women <input type="checkbox"/>	Compound Men <input type="checkbox"/>	Compound Women <input type="checkbox"/>
Junior Recurve Men <input type="checkbox"/>	Junior Recurve Women <input type="checkbox"/>	Junior Compound Men <input type="checkbox"/>	Junior Compound Women <input type="checkbox"/>
Cadet Recurve Men <input type="checkbox"/>	Cadet Recurve Women <input type="checkbox"/>	Cadet Compound Men <input type="checkbox"/>	Cadet Compound Women <input type="checkbox"/>

- Check for Junior Year of Birth _____ Juniors will be ranked with Adults for seeding in the Elimination or Team Rounds.
- Check for Cadet Year of Birth _____ Cadets are not eligible to participate in Elimination or Team Rounds.

For recognition purposes only:

- I am a registered CAP Collegiate division archer: YES NO College / University Name: _____
(Qualification scores will be sorted and posted for the Collegiate Division and also included in the main categories) (Sorry no awards)
- I am a Paralympian: YES NO Class: _____
(Qualification scores will be sorted and posted for the Paralympian Classes and also included in the main categories) (Sorry no awards)
I remain on the shooting line: YES NO

Other info to help us organize: _____

\$125 Adult / Junior Registration Fee (or) \$100 Cadet Registration Fee: = \$ _____

\$35 LATE FEE: (received after the March 25 deadline) (Add \$35 late fee, if applicable)..... = \$ _____

SHIRTS: (Only available by pre-order. Shirts will not be available at the field)

Unisex Sizes: S M L XL XXL \$25 x Quantity _____ Shirts = \$ _____
Embroidered Antigua Brand sports shirts (Check Size)

Women's Sizes: S M L XL \$25 x Quantity _____ Shirts = \$ _____
Embroidered Antigua Brand sports shirts (Check Size)

Total amount enclosed (checks payable in US dollars)..... **Total = \$** _____

All proceeds go to the Arizona State Archery Association to fund target archery programs.

Please only one archer per form and include the signed waiver with your registration.

Make checks payable in US dollars to:

ASAA – Arizona Cup

Mail Registration, Payment and Waiver to:

**ASAA – Arizona Cup
8681 East Via de Negocio
Scottsdale, Arizona 85258 USA**

For additional information: e-mail: info@arizonacup.com or visit our web site: www.arizonacup.com

Nov. 28, 2009

