



Membership Application

Provides Nova Scotia Residents membership to Archery Nova Scotia and Archery Canada for the calendar year and includes \$5,000,000 Liability Insurance.

Please make cheques out to Archery Nova Scotia and mail/drop off to Archery Nova Scotia, c/o Sport Nova Scotia, 5516 Spring Garden Rd., 4th Floor, Halifax, Nova Scotia, B3J 1G6.

Inquiries: info@archeryns.ca | www.archeryns.ca

Membership Type:

If you have been a member of Archery Nova Scotia in the past, please include your ANS Number below:

ANS Number: _____

Membership Type:

\$30 / Youth
Under the age of 21

\$50 / Adult
Age 21 and older

\$110 / Family
Max. two adults per family membership

Member Information:

Primary Member Name (First & Last): _____

Address: _____

City/Town: _____, NS Postal Code: _____

Date of Birth: YYYY MM DD Gender: _____

Email Address: _____

Phone #: _____ Affiliated Club: _____ (Optional)

Optional: Do you identify as indigenous? (First Nations, Inuit or Metis): _____ (Optional)

Family Members to Include with Family Membership (if applicable)				
First Name	Last Name	Date of Birth	Gender	ANS#

Total Fees Enclosed: \$ _____



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Additional Information:

Within each applicable discipline listed below, please select your preferred equipment division and (if applicable) competition age group

Discipline	Equipment Division / Competition Age Group
<input type="checkbox"/> Target	_____
<input type="checkbox"/> Field	_____
<input type="checkbox"/> 3D	_____
<input type="checkbox"/> Para	_____
<input type="checkbox"/> Non-Shooter	_____

Do you Bowhunt? _____

Have you shot a NASP Bow? _____

Level of Participation: Recreational Club Competitive

I am interested in volunteer opportunities within Archery Nova Scotia

I am interested in mentorship / coaching / training and other program opportunities

Emergency Contact Information

Emergency Contact Name: _____

Emergency Contact Number: _____

Contact Relationship: _____

The following checkbox acknowledgements are mandatory for membership

I agree to the use or disclose, without payment of any fee, charge, or compensation of any kind (including royalties) any and all non-focused, background or otherwise unidentifiable photographs, video or other visual media (the Images) of the Participant taken by Archery Canada, my PTSO Archery Association, and/or the applicable registered club for promotional purposes. Agreement to waive any right to approve such use and waive all moral rights I have in such Images in perpetuity. *

I understand that I may withdraw such consent for 'Use of Personal Image' at any time by contacting the Provincial Association or, Archery Canada.

Signature (Parent/Guardian if under age 19)

Date