



Target Archery Award Claim (MB/GMB)

FULL NAME	
ARCHERY GB NUMBER	
BOWSTYLE (Please circle)	RECURVE / COMPOUND / LONGBOW / BAREBOW / CROSSBOW
AWARD CLAIMED (Please Tick)	Junior Master Bowmen – U12 <input type="checkbox"/> Master Bowmen <input type="checkbox"/> Junior Master Bowmen – U14 <input type="checkbox"/> Grand Master Bowmen <input type="checkbox"/> Junior Master Bowmen – U16 <input type="checkbox"/> Master Arbalist <input type="checkbox"/> Junior Master Bowmen – U18 <input type="checkbox"/>

I submit the following scores in support of my claim with a copy of the result sheets with my name highlighted:

DATE SHOT	UK/WRS TOURNAMENT NAME	ROUND	SCORE	Record Status
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

Delete or complete the following as necessary

I have* / have not * previously received a badge for this award.

I am* / am not* classed as a professional archer.

*I am not taking any substance banned by Archery GB or by WA

*I am taking a banned substance and my drug register number is: _____

DECLARATION: I have read and agree to comply with the current Drug Control provisions of Archery GB (SAP-2) and the WA Doping Control Procedures, that all of the information given above is accurate and I understand that if any of this is found to be inaccurate or incomplete this application may be rejected, if any of the information is found to be inaccurate at a later date I agree that I will surrender any award given on the basis of that information, I understand that the defined year for these classifications is a calendar year and that any claim received after the 31 of December may not be accepted.

Signed _____ Date _____

DECLARATION TO BE SIGNED BY THE PARENT / GUARDIAN OF ANY JUNIOR ARCHER MAKING A CLAIM

I declare that I have read all of the information given above and that this is accurate. I also declare that I have read and agree that the archer will comply with all of the statements made by the Archery GB on this form.

Signed _____ Date _____

Print Full Name _____

Relationship to the archer _____

Please return by post to:
 Archery GB ,c/o Awards officer, Lilleshall National Sports Centre, Near Newport, Shropshire. TF10 9AT
 Or by email to enquiries@archerygb.org

FOR OFFICIAL USE ONLY

Claim Checked:.....

Date Processed:.....

Award Sent: