NORTHERN VIRGINIA ARCHERS 2020 MEMBERSHIP RENEWAL

Primary Member Information

Last Name	First Name	VBA Member Number
Street		Apartment
City	State	Zip
Phone	Email	

Additional Family Members

Last Name	First Name	DOB (if under 18)
Last Name	First Name	DOB (if under 18)
Last Name	First Name	DOB (if under 18)
Last Name	First Name	DOB (if under 18)

Members under 18 must be supervised by the Primary Member (a legal guardian) when on any range.

Fees

- **Primary Membership** ($150) **or** **$_____**
  Volunteer Discount ($75 for 10 volunteer hours in 2019 — see * below)
- **Family Members**
  $10 spouse _____
  $5 per child under 18 _____
  $20 per child 18 and over living at home _____
- **Late Fee** ($10 if application received after January 31, 2020) **_$10__**

Total Dues for 2020 (payable to Northern Virginia Archers)
(For credit card, include the Credit Card Authorization form) **$ _____**

Certification

All members listed on this form have read the NORVA Range Rules (http://novaarchers.org/members.html) and agree to fully comply with all of them.

Primary member signature _____ Date _____

Mail To: NORVA Treasurer
PO Box 7130
Fairfax Station, VA 22039

Include:
1. This form (* Volunteer discount must be approved by a board member)
2. Liability waivers for each member
3. Payment (For credit cards include the Credit Card Authorization form)

Payment Method: ☐ NORVA Card?
Received By: ☐ VBA Card?
Received Date: ☐ Liability Form?
☐ Certification?

Club Use Only