

**MEMBERSHIP APPLICATION  
ALASKA STATE ARCHERY ASSOCIATION**

Attn: ASAA Secretary  
P.O Box 874390  
Wasilla AK 99687

DATE \_\_\_\_\_

NEW RENEWAL (if you have renewed with NFAA it is not necessary to renew with ASAA)

NAME \_\_\_\_\_

NFAA MEMBERSHIP IS REQUIRED FOR: Northwest Sectionals

- Adult @ \$60 (includes ASAA & NFAA)       ASAA only Adult @ \$25  
 Youth @ \$30 (includes ASAA & NFAA)       ASAA only Youth @ \$15

(If primary member is under 18; additional family members not allowed)

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

Male     Female

PHONE NO \_\_\_\_\_

**FAMILY MEMBERS:**

**Additional family member 1 @ \$5**

Name \_\_\_\_\_  Male     Female  
Birthdate \_\_\_\_\_  
(If under 18 years)

**Additional family member 2 @ \$5**

Name \_\_\_\_\_  Male     Female  
Birthdate \_\_\_\_\_  
(If under 18 years)

**Additional family member 3 @ \$2**

Name \_\_\_\_\_  Male     Female  
Birthdate \_\_\_\_\_  
(If under 18 years)

**Additional family member 4 @ \$2**

Name \_\_\_\_\_  Male     Female  
Birthdate \_\_\_\_\_  
(If under 18 years)

Make check payable to the Alaska State Archery Association (ASAA) and mail this application along with your membership fee to the address above.

If you have additional family members that you would like to add please check here  and add them to the back of this sheet. Thank You.