

Panda Bowmen Archery Club

President
Mr Keith Harrison
Treasurer

Chairperson
Mr Phil Wiles
Secretary

Mrs Amanda Driffield Mrs Rosemary Hilton www.panda-bowmen.co.uk

Beginners Course Registration Form

Name		
Address		
Post Code		Telephone
E-mail		Mobile
Emergency Co Name	ntact 	Telephone
Date of Birth (j	juniors under 18 years of age)	· · · · · ·
Please put addit	ional names, dates of birth and signatur	res overleaf if required.
Signed		(applicant)
Signed		(parent or guardian for junior)
Date		
Parents are requ	rired to accompany children.	
Transfer to Pand	•	urance and equipment hire. Payment by Bank ount Number 78833531 - please use your surname is form is required to secure the place.
Date of bank tra	ansfer:	· · · · · · ·
Bank transfer re	eference:	· ·· ·· · ·
Please return thi	is form with payment to:	

Panda Bowmen, 33 Iveson Rise, Leeds, LS16 6LN

Forms and deposits sent to any other address are unlikely to be received.