



APPLICATION FOR MEMBERSHIP

(Tick the relevant boxes below.)

Recognised Governing Body (RGB): **ARCHERY SA**

APPLICANT DETAILS: [PLEASE PRINT CLEARLY]

Current member No.
(if from another affiliated club)

Surname..... Given Name.....

(Complete this next (greyed) section if you have NOT applied online via the membership database.)

Residential AddressPost Code.....

Mailing Address (if different from Residential Address)
.....Post Code.....

Telephone (Home)..... (Mobile)..... (Work).....

Email.....

Date of Birth: Gender: Male / Female /Prefer not to say

Emergency Contact Name..... Phone.....

Membership applied for: SHOOTING Club Associate (shooting) Club Associate (non-shooting)

Type of bow you expect to use: Recurve Compound Barebow Longbow Crossbow

1. I certify that the information given by me is correct and hereby make application for membership of the Club, ARCHERY SA and Archery Australia Inc. I agree to be bound by, and to conduct myself in accordance with, the respective constitution, by-laws, rules, policies and procedures of the Club, ARCHERY SA, and Archery Australia., and the ARCHERY Australia Code of Conduct. (available at <https://archery.org.au/policies/>)
2. I hereby declare that I am not aware of any health issues or impediments, which would endanger the safety of myself or other persons and that if I do have, or become aware of such issues in the future, I will notify the Secretary in writing before engaging in any archery related activity.
3. Your privacy is our priority. All personal information you have provided will help us process your application to become a member. Archery Australia, RGB and Club may use your information to communicate with you and inform you of activities and events. Full copy of our privacy policy available at <https://archery.org.au/policies/>
4. I acknowledge the collection and use of my personal images, results, scores, awards and prizes received, may be used by the Club, ARCHERY SA or Archery Australia for websites, social media, newsletters, and publications for the promotion of the sport, and that this information can be viewed by anyone who accesses Club, ARCHERY SA or Archery Australia social media platforms or mainstream media and publications in general. If I do not consent, I acknowledge that my name will not be registered on Archer's Diary (Archery Australia's scoring platform), but I will be identified by my Member ID Number only.

I ACKNOWLEDGE THE ABOVE CONDITIONS YES NO

I understand that I may alter my consent at any time by providing written notice to the Club Secretary.

SIGNATURE _____ DATE ____/____/____

NAME AND SIGNATURE OF PARENT OR GUARDIAN IF APPLICANT IS UNDER 18

I agree to ensure that my Son/Daughter/Dependant abides by the above declaration.

NAME (print) _____ SIGNATURE _____

Website: <https://www.edenfieldarchers.com>

email: secretary@edenfieldarchers.com

facebook: <https://www.facebook.com/edenfieldarchers>

June, 2026



TO JOIN VIA THE ONLINE MEMBERSHIP SYSTEM:

Make application to **JOIN** the Club: complete this **APPLICATION FORM** and pay the relevant fee:

- If you haven't already, "Sign Up" to create an account at <https://account.archery.assemblesports.io/sign-up>
- Then, once logged in, go to: <https://account.archery.assemblesports.io/c/club/EDEN%20Field%20Archers/login> and follow the prompts.

Existing Members - to RENEW your membership:

<https://account.archery.assemblesports.io/c/club/EDEN%20Field%20Archers/dashboard>

New & Existing Members - Eligible for a Schools Sports Voucher?

Complete the form and forward it to the Club (secretary@edenfieldarchers.com).

<https://www.sportsvouchers.sa.gov.au/2025-Sports-Voucher-Registration-Form.pdf>

We will be in touch to provide a code so you can reduce the fee payment(s) due.

To pay by EFT:

Bank details BSB: **633000** Account: **245053798** Reference: **Surname**

To pay by cash:

Present this form and the cash at the Club, to an authorised person.

NOTE: Before making payment by cash or EFT, please contact us to verify the amount payable.

CLUB USE ONLY:

APPLICABLE FOR CASH or EFT payments

Coaching attended or Skills shown: YES / NO

FEE DUE \$ _____

Gate Key deposit \$ _____ (optional)

TOTAL \$ _____

Gate Key No: _____

Membership Approved: / / Membership Number: _____

New member pack Issued: / / Records Completed Date: / /

PAYMENT RECORD

Date	Amount	Receipt No.	Payment type CASH / EFT
	\$		