



## Bronze Marksman Club Application

Last Name

First Name

E-mail Address

Team/School

City

State/Province

Country

### Age Group:

- Over 20
- 16 to 19
- 12 to 15
- Under 12

### Confirmation

I HAVE SUCCESSFULLY MADE 25+ CONSECUTIVE THREE THROWS

Date (mm/dd/yy)

### Location

- Team Practice       Game Competition       Individual Practice

### Gender:

- Male
- Female

### Attested By

Name

Email Address:

I am fully aware of the honor system is in effect.

**NOTE: Selecting the SUBMIT button will produce an e-mail that you may need to send using your e-mail program.**

If you encounter emailing problems, print out completed application and fax to: (425) 562-7228