

Camp Archery Association Membership Application and Renewal form

Date: _____

Camp Name _____

Camp Email Address _____

Camp Website _____

Camp Phone Number _____

Camp Owner or Managing Director _____

Archery Program Contact _____

Archery Contact Email _____

Archery Contact Phone _____

Camp Mailing Address

Street _____

Address Line 2 _____

City _____ State ____ Zip _____

Camp Shipping Address (If Different)

Street _____

Address Line 2 _____

City _____ State ____ Zip _____

Number of Campers Anticipated This Season _____

Number of Campers Expected to do Archery this Season _____

Has your camp been a member of the CAA in previous years? Yes ____ No ____

May we send you email updates about the Camp Archery Association? Yes ____ No ____

Best off-season contact name and email _____

Comments :