

15887 McCowan Rd. Stouffville ON, L4A 2P2 www.yorkcountybowmen.com

ARCHERY SCHOOL

2022 Fall Class (Start Sep 17, 2022)

Primary Name:				
Mailing Address:				
Preferred Contact: phone #	!:	or e-mail:		
Session:	9:30 AM – 1	1:30 AM		
Emergency Information:				
Contact Name:		Contact Telephone:		
Family Physician:		Family Physician To	elephone:	
Class Fees:				
	Quantity	Cost + HST	Cost Per	Total Cost
Primary (Adult) Student	1	\$150.00 + \$19.50	\$169.50	\$169.50
Additional Student (max 3)		\$125.00 + \$16.25	\$141.25	

Outline of Sessions:

Session 1: (Sep 17) - Introduction to Archery/ Explain Safety rules - Equipment and Selection - Basic of Good Shooting Form Session 2: (Sep 24) - Review: Basics of Good Shooting Form - Motion Shooting Sequence - Addition of Sight and Adjustments Session 3: (Oct 01) - Review: Motion Shooting Sequence - Warm-Up: Blind Bail/Shooting Session 4: (Oct 15) Tour of Forest (weather permitting); **Equipment Recommendations;** Session 5: (Oct 22) - Arrow Grouping Analysis and Tuning - Target Face and Scoring



To ensure you receive the most from your lessons please be guided by:

- Safety is our #1 priority ... direction from our instructors/coaches must be followed!
- Suitable clothing, short or tight sleeves and firm footwear are recommended, no sandals or bulky clothing please.
- Long hair should be secured in some manner.
- Please arrive on time; all necessary equipment will be provided.
- COVID Protocol: Face Covering as per Provincial health Guidelines and sanitation lotion.

Waiver Form:

There is a potential risk for personal injury and damage to property while attending or participating in any form of sports activity. We at YORK COUNTY BOWMEN endeavor to create and maintain a safe environment at our facilities and we have established reasonable control of rules of conduct for participants, spectators and guests that must be followed.

The following release must be signed by all participants in the lesson(s)

Release:

I/we have read the above notice of warning and fully understand the risks and conditions of participating in the lesson(s) organized or sponsored by YORK COUNTY BOWMEN.

I/we hereby save harmless and indemnify YORK COUNTY BOWMEN, its Officers, Directors, Coaches and Assistants from demands, claims, acting suits or proceedings arising out of participation in any Club activity or program or making use of the club facility in general.

Student Name (Print) Primary	Signature	Birth: Month / Year
Additional		
Additional		
Additional		

ubmit Application to hold your spot in class: school@yorkcountybowmen.co
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Upon receiving Payment Email,

send payment by Interac EMT (Email Money Transfer) to school@yorkcountybowmen.com to Secure spot in Session.