

**Ee Da How Bowhunters
Indoor League Registration
2018-2019**

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Phone: _____

Team: _____ As a Sub: _____

Team Name: _____

Membership- Individual \$50 _____ Family \$60 _____

Names of Additional Members for Family Membership _____

Shooting Fees per person (1/2 can be paid in November and 1/2 The first Monday in January)

Full Fee \$60 _____

1/2 Fee \$30 _____

For Official Use:

Amount Paid: _____

Signed Liability Form: _____

