



KENT ARCHERY ASSOCIATION

www.archerykent.org.uk

County Record Claim

About You:

Title:	Mrs.	Miss	Mr.	Mstr.	Other
Surname:					
Forename(s):					
Address:					
Telephone no:					
E-mail Address:					
Date of Birth:					
ArcheryGB member no:					
Club Name:					

Your Record Claim:

Date Shot:					
Venue:					
"Club Day" or Event:					
Gender:	Lady			Gentleman	
Age Group:	Senior	Under 18	Under 16	Under 14	Under 12
Discipline:	Outdoor Target	Indoor Target	Field	Clout	
Bow Type: (circle one only in the same column as the selected Discipline.)	Compound Unlimited Recurve Freestyle Recurve Barebow Longbow	Compound Unlimited Recurve Freestyle Recurve Barebow Longbow	Compound Unlimited Compound Limited Compound Barebow Recurve Freestyle Recurve Barebow Recurve Traditional American Flatbow Longbow	Compound Unlimited Recurve Freestyle Recurve Barebow Longbow	
Disability Category:	None	ARST	ARW1	ARW2	ARVI (blindfold)
Round Shot:					
Score:					

Supporting Document:

You must enclose one of the following: (please tick one only)	If your claim relates to a round shot at a tournament or competition, then please enclose a copy of the complete results list. (Please highlight your result.).	If your claim relates to a round shot at a club target day, then please enclose your original score sheet, signed by you and the target captain and certified by a club official that the round was shot and scored in compliance with ArcheryGB rules.
	<input type="checkbox"/> Tick if applicable	<input type="checkbox"/> Tick if applicable

Signature of Archer: _____ Date: _____

- I accept the Terms and Conditions included in the current KAA Policy – County Records and confirm that the above information is accurate.
- I confirm that this score was shot & scored according to ArcheryGB rules and complies with the eligibility conditions for county records.
- I enclose a copy of the tournament results or a completed score-sheet to support my claim.

Please ensure that you have completed **all** sections of this form.