## FAA MEMBERSHIP APPLICATION

| NAME:                 | NFAA #:         |                 |              |
|-----------------------|-----------------|-----------------|--------------|
| ADDRESS:              |                 |                 |              |
| PHONE:                |                 |                 |              |
| EMAIL:                |                 |                 |              |
| CLUB:                 | SHOOTING STYLE: |                 |              |
| List additional famil | y members fo    | or your members | hip here:    |
| First & Last Name     |                 | Birthday        | Relationship |
|                       |                 |                 |              |
|                       |                 |                 |              |
|                       |                 |                 |              |
|                       |                 |                 |              |
|                       |                 |                 |              |
|                       |                 |                 |              |

| FAA/NFAA Annual Memberships |         |  |  |
|-----------------------------|---------|--|--|
| Youth Only (under 18)       | \$30.00 |  |  |
| Adult (no dependents)       | \$55.00 |  |  |
| Adult +1 Dependent          | \$69.00 |  |  |
| Adult +2 Dependents         | \$78.00 |  |  |
| Each additional dependent   | \$5.00  |  |  |

| Life Memberships     |          |  |
|----------------------|----------|--|
| FAA (no dependents)  | \$225.00 |  |
| FAA (Spouse)         | \$60.00  |  |
| NFAA (no dependents) | \$800.00 |  |
| NFAA Senior (65+)    | \$240.00 |  |
| NFAA (Spouse)        | \$200.00 |  |

Make check payable to and send to:

Florida Archery Association, Inc. Attn: Secretary/Treasurer 1620 Yearling Trl Tallahassee, FL 32317

Form Version: 2022/07/14