

Colorado JOAD Records Claim form

Athlete Name	
USA Archery Membership Number:	
JOAD Club:	
Date of Birth:	Gender:
Age Division:	_
Bow Type:	
Event Name:	
Event Date:	
Event Location:	
Complete the section below for each r Indoor 300 Round Record:	ecord that you are claiming from this event:
Previous Record:	New Record:
Indoor 600 Round Record:	
Previous Record:	New Record:
Outdoor 72 Arrow Round Record:	
Previous Record:	New Record:
Outdoor 144 Arrow Round Record:	
Previous Record:	New Record:

Send Completed forms to Colorado State Coordinator:

jdblflores@hotmail.com