

Application for PCBA Membership

Physically Challenged Bowhunters of America, Inc.

P. O. Box 206

Honeoye, NY 14471

(812) 585-0692 or toll-free at (855) 247-PCBA (7222)

Email: jbrodpcba@aol.com

www.physicallychallengedbowhuntersofamerica-inc.org



Application 2017

Annual Fee:

Youth: \$5 (0-16 years)

Individual: \$15

Family: \$40

Lifetime: \$500

Corporate: \$100

If sending application via US mail, please send a check with application.

Join Today or Recruit a New Member!

For Which Membership Are You Applying?

Disabled _____ Able-bodied _____ Lifetime _____ Corporate _____ Youth _____

Name _____ Date of Birth ____/____/____

Address _____ Email _____@_____

City _____ State _____ Zip Code (include last four) _____-____

Home Phone (____) _____ Business Phone (____) _____ Fax (____) _____

Cell Phone (____) _____ Website address: http: _____

Please Indicate Where Applicable:

Type of Disability _____

How Long Have You Been Disabled? _____

Currently Shooting (Please Circle One) LONG BOW RECURVE COMPOUND CROSSBOW NONE

Type of Adaptive equipment you use: _____

Are You A U.S. Veteran? If Yes, Please Indicate Branch & Wars Served In _____

What Assistance Do You Need From PCBA? _____

In What Ways Would You Like To Assist PCBA? _____

Signature _____ Date ____/____/____

PARENT/GUARDIAN MUST SIGN BELOW IF UNDER 18 YEARS OF AGE

I am the parent/guardian of the above signed minor (under 18 years of age) and agree to his or her membership in the PCBA.

Signature _____ Date ____/____/____