

# *Mayberry Archers Beginners Class*

Send To: Nancy Mott, Corresponding Sec.  
P. O. Box 2183  
Westminster, MD 21158

*Name :*

*Name:*

*Age if under 21:*

*Parent Name if under 21:*

*Phone # :*

*Home Address:*

*Email:*

This area below will be filled out by Mayberry Archers:

*Payment :* \_\_\_\_\_ *Cash:* \_\_\_\_\_ *Check#:* \_\_\_\_\_