



**Record Status 24<sup>th</sup> Open Junior Portsmouth  
Saturday 10<sup>th</sup> November 2018  
Including a 2 Archer team round (Junior plus Adult)**

**Lady Paramount:** TBA **Judges:** Mr Brian Dunlop and Ms Pat Kerrigan.

**Venue:** Alameda Sports Hall, Ampthill, Bedfordshire.

**Faces;** Single or Triple spot. Please indicate your choice in the column provided.

**Entry Fee:** £8.00 per session.

**Bank transfer** preferred – please pay Clophill Archery Club, sort code 20-05-74, account number 50270695.

Please include the reference “Junior 2018”. **Cheques** should be made payable to ‘Clophill Archery Club’.

**By entering** this competition the following information may be collected and shared with tournament organisers, scoring systems and other competitors, for example, target lists and results may be published which include: First Name, Surname, Gender, Bowstyle, Date of Birth/ Age category, Email, Address, Phone Number, Club (and ID), County (and ID), Region (and ID), Round (unless defined by age), Disabled (Y/N), Disability info.

**Sessions: A; Assembly 12:00pm Start 12:15pm B; Assembly 3pm Start 3:15pm**

**Equipment inspection:** Before each round. Will only be required for the first round shot on the day.

**Sighters:** Before each round, irrespective of whether you have shot a previous round.

**Entries to:** Ms Suzi Bredin, 60 St. Michaels Crescent, Luton, Beds., LU3 1NA

Phone: 07919137065

E-mail: suzib148@hotmail.co.uk

**Closing Date:** 27th Oct 2018 (or when full) **Late Entries:** Subject to available space.

No refunds after closing date.

**Awards:** Will be by medals, but at least the following:

REC	BOY	GIRL	COMP	BOY	GIRL	G/F B/Bow	BOY	GIRL
U18	1st & 2nd	1 <sup>st</sup> & 2nd	U18	1st& 2nd	1 <sup>st</sup> & 2nd	U18	1st	1st
U16	1st & 2nd	1 <sup>st</sup> & 2nd	U16	1st & 2nd	1 <sup>st</sup> & 2nd	U16	1st	1st
U14	1st & 2nd	1 <sup>st</sup> & 2nd	U14	1st & 2nd	1 <sup>st</sup> & 2nd	U14	1st	1st
U12	1st & 2nd	1 <sup>st</sup> & 2nd	U12	1st & 2nd	1 <sup>st</sup> & 2nd	U12	1st	1st

**Team Awards** for Recurve. Compound and Longbow: Any 3 Archers from same club.

1. Longbows welcome and awards will be available according to entry.

2. The shoot is open to all AGB affiliated archers.

3. Backstop netting will be provided.

4. AGB Dress regulations Rule (307) apply and will be enforced.

5. AGB numbers must be included on the entry form. Any archer failing to do so will be required to produce their card on the day. If an archer is awaiting their card, they must have proof from their club that their affiliation fees have been paid.

6. Target list & results will be posted on [www.clophillac.co.uk](http://www.clophillac.co.uk).

7. Clophill Archery Club, Ampthill Town Council and their agents or servants cannot accept any responsibility for any loss, damage or injury. Entry to the tournament will be considered acceptance of these conditions.

8. Drug Testing. Record status shoots are liable for Drug Testing. Any competitor approached to give samples for testing MUST comply. If they refuse, that refusal will be treated as a positive result.

9. Photography. In line with the AGB Policy for safeguarding Children, Young People and Vulnerable Adults, those who wish to engage in any video, zoom or close range photography at this event are to register with booking in on arrival. No unauthorised photography will be permitted.

**Note:** There is only limited seating available - please bring a chair suitable for use in a sports hall if required.

Footwear with a non-marking sole is required in the hall

### Team Round

This will be open to the accompanying adult, parent or guardian of the junior.

A) Medals will be presented for the highest combined score of the junior and adult team members.

B) The team members must both shoot the same bow style.

C) Categories will be: Recurve (incl G/F, Bare Bow). Compound. Longbow.



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	Gender	Name	Club	Session A or B	Single or Triple Spot	Age Group	Wheelchair Stool User?	Age on 10/11/18	AGB Number	Bow Type R, C, L	Entry Fee £8.00
<b>Junior</b>											
<b>Team Mate (If applicable)</b>											
<b>Junior</b>											
<b>Team Mate (If applicable)</b>											
<b>Junior</b>											
<b>Team Mate (If applicable)</b>											
<b>Junior</b>											
<b>Team Mate (If applicable)</b>											

DISABLED ARCHERS - PLEASE STATE YOUR NEEDS.....

Total Fee £ \_\_\_\_\_

ARE YOU ABLE TO MOVE ON AND OFF THE LINE IN THE TIME ALLOWED Yes/No DO YOU INTEND TO BRING AN ASSISTANT/AGENT Yes/No

Please tick if you are **NOT** prepared to collect and score arrows for disabled archers

Parent Guardian Signature(s) for Junior drug testing:

Contact Name and Address :

Telephone Number:

E-Mail Address (Please use block capital