

INDIANA FIELD ARCHERY ASSOCIATION

Outdoor State Championship

HOST CLUB: _____

DATE: _____

	Total Number:		Amount:		Total:
OFFICERS \$35	_____	X	\$ 35.00		_____
OFFICERS NO DISTRICT \$55	_____	X	\$ 55.00		_____
ADULTS \$35	_____	X	\$ 35.00		_____
ADULTS NO DISTRICT \$55	_____	X	\$ 55.00		_____
CHILD \$15	_____	X	\$ 15.00		_____
CHILD NO DISTRICT \$25	_____	X	\$ 25.00		_____
FAMILY - 2 OR MORE max \$50	_____	X	\$ 50.00		_____
FAMILY NO DISTRICT- 2 OR MORE max \$70	_____	X	\$ 70.00		_____
VISITOR \$35	_____	X	\$ 35.00		_____
CHILD VISITOR \$15	_____	X	\$ 15.00		_____
GRAND TOTALS:	=====				=====
TOTAL AMOUNT PAID BY CASH/CHECK (compare to registration)	+		_____		
TOTAL AMOUNT PAID ONLINE (compare to registration)	+		_____	40%=	
AWARDS TOTAL	-		_____		
TOTAL	=		=====		
PAY TO HOST CLUB (60%)					How paid: _____
IFAA (40%)					
PAID TO TREASURER = IFFA (40%) TOTAL MINUS 40% PAID ONLINE					

Senior Director/Officer:

Keep the duplicate copy of the of the score cards for 60 days.

Keep a copy of this form.

Give a copy of this form to the Host Club with their payment.

Mail the IFAA portion to the IFAA Treasurer along with a copy of this form.

Send a copy of the shooter information & score spreadsheet to the IFAA Secretary within three (3) days of shoot.

IFAA Treasurer: Ben Rance rbarchery@hotmail.com
 IFAA Secretary: Jessica Shearier ifaaarchery@outlook.com

1421 N CR 550 E, Logansport, IN 46947

SIGNATURE OF IFAA OFFICER/DIRECTOR

DATE

The IFAA thanks you for hosting this tournament. This is your receipt, please retain this for your records.