

L & R C A A
Records Claim Form

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Remember when filling this form in to check whether the
record can only be shot at record status shoots only

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NAME:	NAME:
ADDRESS:	ADDRESS:
POSTCODE:	POSTCODE:
TELEPHONE NUMBER:	TELEPHONE NUMBER:
GNAS NUMBER:	GNAS NUMBER:
DATE OF BIRTH AND AGE IF JUNIOR:	DATE OF BIRTH AND AGE IF JUNIOR:
CLUB:	CLUB:
COUNTY:	COUNTY:
BOW TYPE:	BOW TYPE:
DATE OF SHOOT:	DATE OF SHOOT:
VENUE:	VENUE:
SCORE:	SCORE:
ROUND:	ROUND:
CATEGORY BEING CLAIMED: (IE: GIRLS UNDER 13)	CATEGORY BEING CLAIMED: (IE: GIRLS UNDER 13)
SCORESHEET ENCLOSED:	SCORESHEET ENCLOSED:
RESULTS SHEET ENCLOSED:	RESULTS SHEET ENCLOSED:
send to ANDY WATSON (EMAIL lrcaa-records@ntlworld.com)	send to ANDY WATSON (EMAIL lrcaa-records@ntlworld.com)
10 OVERPARK AVENUE LEICESTER LE3 1NH	10 OVERPARK AVENUE LEICESTER LE3 1NH