



SILVERTIP JUNIOR ARCHERS  
TRAVEL FUND APPLICATION

ARCHER'S NAME \_\_\_\_\_

NAME OF THE EVENT \_\_\_\_\_

LOCATION OF EVENT \_\_\_\_\_

Target  3D

DATE OF THE EVENT \_\_\_\_\_

AMOUNT PAID FOR REGISTRATION \_\_\_\_\_

ARCHER'S SIGNATURE \_\_\_\_\_

**For target funding**, and **3D funding** please submit letter to:

Silvertip Archers Board of Directors [silvertiparchers@gmail.com](mailto:silvertiparchers@gmail.com)

ACCEPTED \_\_\_\_\_

REJECTED \_\_\_\_\_