



## LAKESHORE BOWHUNTERS, LTD 3D ARCHERY LEAGUE 2009



We are now forming our 3D summer league. League will start the week of May 13th, 2009 and will run for twelve weeks ending Thursday August 7th 2009. The week of July 4<sup>th</sup> will be a bye week. New this year we will be starting a division for people who want to shoot **CROSSBOWS**. The crossbow division will be on an individual basis. Compound, recurve, and long bow will be three person teams.

1. Cost of the league fees will be as follows:
  - A. League fee: \$65.00 per person, to be paid before you shoot**
  - B. Family plan, to help offset the cost of more than one shooter in a family (household)**
    1. 1<sup>st</sup> shooter \$65.00
    2. 2<sup>nd</sup> shooter \$45.00
    3. 3<sup>rd</sup> (4<sup>th</sup>) shooter \$40.00
    4. Juniors or Cadets who shoot ONLY those league \$25.
2. Shooting hours will be from 4:00 P.M. until dark on Tuesday, Wednesday, and Thursday of each week. Wednesday AM shooting 8:00AM until 12:00. Friday will be a makeup day if it rains for the three days.
3. If you are interested in joining our 3D league this year, please complete this form and return it to:  
Kevin Quast  
N 9544 Van Dyne Rd.  
Van Dyne, Wi. 54979
4. As another option Lakeshore Bowhunters is looking for new members.
  - A. Single membership \$50.00**
  - B. Prepaid club shoots \$30.00**
  - C. Single membership + 3D league \$80.00**
  - D. Single membership + 3D league + club shoots \$100.00**
  - E. Family membership + 3D league \$90.00**
  - F. Family membership + 3D league + club shoots \$120.00**

Please contact Tony Valentino at 920-907-8973 If you have any additional questions or concerns about 3D league.

Make Checks Payable to Lakeshore Bowhunters, LTD

### YOU MUST PAY BEFORE YOU SHOOT.

TEAM NAME \_\_\_\_\_  
NAME (team captain) \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name \_\_\_\_\_ Phone # \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name \_\_\_\_\_ Phone # \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_