

JOAD Olympian Achievement Award Request for Recognition



Award Requested:	☐ Olympian ☐ Silver Olympian ☐ Gold Olympian		☐ Indoor ☐ Outdoor	Recurve Compound	
Name:					
Address:					
City:		State:	Zip:		
Phone:			Forward Award Presen	ntation to club	
Gender: Male	Female		address:		
Date of Birth:					
Club Affiliation:		—	Contact Phone:		
USA Archery Member	rship Expiration:				
Jacket Size (First time	Olympian Award Only) Adu	ılt:	☐ X-Small ☐ Med ☐ Small ☐ Large	□ XL □ 3XL □ XXL	
Type of Round:	☐ JOAD Round ☐ FITA Outdoor	☐ 70 Meter ☐ FITA-I			
Type of Event:	☐ Sanctioned STAR ☐ Club	Sanctioned Qualifier			
Date of Event:		Organ	Organizer:		
Name of Event:		Offici	al Present:		
I hereby certify that the Guidelines	e awards requested were sho	t accordi	ng to USA Archery JOAD	Rules and	
	Signature		Judge Level 4	Level 5 Level 3 Level 2	
Please attach a comple	te, legible and signed copy of	of scoreca	ard and send to:		
USA Archery 711 North Tejon Stree Colorado Springs, CO					

Direct any questions to the USA Archery Office: (719) 866-4576 or info@usarchery.org