



900 Round

Name _____

Class _____

Address _____

City/St/Zip _____

Phone _____ Email _____

End	Arrow						End Total	X's
	#1	#2	#3	#4	#5	#6		
60 Yards								
1								
2								
3								
4								
5								
50 Yards								
6								
7								
8								
9								
10								
40 Yards								
11								
12								
13								
14								
15								
Totals								
End of 1st Dropped Point								
End of 1st Dropped "X"								
Arrow Count							X's	10's
							9's	8's

Date _____

Archer Signature _____

Score Keeper #1 _____

Score Keeper #2 _____



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