



44th U.S. National Indoor Championships
2013 JOAD National Indoor Championships

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INDIVIDUAL REGISTRATION FORM (Please only one athlete per form)

Please return one completed entry form per archer (photocopies are acceptable) with the registration payment of \$75, to the address noted on the "Event Location Details." Family cap: \$250. Make checks payable to the Host Club for your Regional Indoor Location. Payment must accompany each entry. Add \$50 per entry if postmarked after deadline of 18 days prior to event start. Cancellations received seven days prior to the start of each tournament can receive a refund of registration fee less 30%.

Name:					
Address:					
City:					
State:		Zip:		Country:	
Country of Citizenship:			Birthdate:		
Phone #:					
Email:					
Member of USA Archery:	Y / N	Exp:	Member ID #:		
Member of NFAA:	Y / N	Exp:	Member ID #:		

OFFICIAL CATEGORIES: Please check one of each category (where applicable).

Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<i>*Youth age divisions may only register in the Recurve and Compound Classes.</i>	
Guest: <small>(non U.S. Citizen)</small>	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
Age Division:	<input type="checkbox"/> Bowman *	<input type="checkbox"/> Cub *		
	<input type="checkbox"/> Senior	<input type="checkbox"/> Masters 50+	<input type="checkbox"/> Masters 60+	<input type="checkbox"/> Masters 70+
Class:	<input type="checkbox"/> Recurve	<input type="checkbox"/> Compound	<input type="checkbox"/> Compound Fingers <small>(masters only)</small>	<input type="checkbox"/> Barebow <small>(senior & masters only)</small>
	<input type="checkbox"/> Traditional Longbow <small>(senior only)</small>	<input type="checkbox"/> Modern Longbow <small>(senior only)</small>	<input type="checkbox"/> Traditional Recurve <small>(senior only)</small>	<input type="checkbox"/> Crossbow <small>(senior only)</small>
PARA Class:	<input type="checkbox"/> ARW1 Compound	<input type="checkbox"/> ARW2 Recurve	<input type="checkbox"/> Standing Recurve	<input type="checkbox"/> AR Open Compound

Additional Para Class Information: I remain on the shooting line: YES NO

Other information to help us organize: _____

Emergency Contact Information:

Name: _____

Phone Number: _____

Relationship to Athlete: _____



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PHOTO RELEASE

Photographs and videos are routinely taken at tournaments. I release the use of my image for the purposes of recording the tournament events and promoting archery. With my signature below, I agree that images of me that are taken at this event may be used without compensation or additional permission.

CODE OF CONDUCT

By signing this release, I agree to be bound by the USA Archery Athlete Code of Conduct, and understand that my participation in this and other USA Archery event(s) is contingent upon my adherence to the Athlete Code of Conduct. The code of conduct may be viewed here: [Code of Conduct](#)

WAIVER AND RELEASE OF LIABILITY AND ASSUMPTION OF RISK

In consideration of me (or my minor child, if Participant is under the age of 18) being allowed to participate in any way in any ("Activity") with USA Archery, I agree:

1. I understand dangers may be caused by my/my minor child's own actions, or inactions, the actions or inactions of others participating in the Activity, and the condition. I understand the nature of **USA Archery** activities and acknowledge my experience and capabilities and believe I am/my minor child is qualified to participate in such Activity. I further acknowledge that I am aware that the activity will be conducted in facilities open to the public during the Activity. I further agree and warrant that if, at any time, I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity.
2. I FULLY UNDERSTAND that: (a) **USA Archery** activities involve risks and dangers of SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS AND DEATH ("Risks"); (b) these Risks in which the Activity takes place or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be other risks and social and economic losses either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES incurred as a result of my participation in the Activity.
3. I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO HOLD HARMLESS **USA Archery**, their respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and if applicable, owners and lessors of premises on which the Activity takes place (each considered one of the "Releasees" herein) from all liability, claims, demands, losses, or damages on account caused or alleged to be caused in whole or in part by the negligence of the "Releasees" or otherwise, including negligent rescue operations and further agree that if, despite this release, I, or anyone on my behalf makes a claim against any of the Releasees named above, **I WILL INDEMNIFY, SAVE AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE OR COST ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.**

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY THE LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THAT THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

_____	_____	_____
Printed Name of Participant	Signature of Participant	Date
_____	_____	_____
Printed Name of Witness	Signature of Witness	Date
_____	_____	_____
Printed Name Parent/Guardian (Participant Under 18)	Signature of Parent/Guardian	Date

All forms must be completed and signed.