

GEORGIA ARCHERY ASSOCIATION

2015 GEORGIA CUP

REGISTRATION FORM

Saturday & Sunday, May 2 & 3 2015

Earl O'Neal Soccer Complex

Conyers, GA

Practice at 8:00AM First scoring arrow at 9:00AM

NAME _____

ADDRESS _____

CITY _____ COUNTY _____ STATE _____ ZIP _____

BIRTHDATE _____ NAA/NFAA MEMBER _____

EMAIL _____ Phone _____

ENTRY INFO: Circle one for each letter: (one archer per form)

A) MALE FEMALE

B) RECURVE COMPOUND

C) JR/SENIOR CADET

TOURNAMENT FEE: \$35.00 FOR ALL ARCHERS

Registration Form must be post marked by April 24, 2015

FAMILY DISCOUNT: First Archer - full price, each additional archer \$15.00, \$50.00 Max.

Family discount applies to mail-in registrations only. Registrations must be received and paid for at the same time to receive family discount. Cancellations received BEFORE THE DEADLINE RECEIVE FULL REFUND Cancellations one week prior to the tournament can receive a refund of registration fee less \$5.00 per archer.

*******NAA DRESS CODE REQUIRED FOR EVERYONE*******

Waiver Form

IN CONSIDERATION of my involvement at this GEORGIA ARCHERY ASSOCIATION EVENT, I acknowledge and agree that: (1) I risk bodily injury, including paralysis, dismemberment, disability and death, and while particular rules of my sport, equipment, personal training and discipline may reduce this risk, the risk of injury does exist, as well as the risk of damage to or loss of property; (2) I knowingly and freely assume all such risks, both known and unknown, even if arising from negligence of the releases or others; (3) I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual or unnecessary hazard during my presence or participation, I will bring such to the attention of the nearest official immediately; and (4) I, for myself and on behalf of my heirs, assigns, personal representatives, and next of kin, hereby release, hold harmless and promise not to sue the National Archery Association, its officers and board members, volunteers, officials, agents, sponsors and/or employees, or the Georgia Archery Association, its officers and board members, volunteers, officials, agents, sponsors and/or employees, with respect to any and all injury and loss arising from my participation, whether caused by the negligence of the releases or otherwise, except that which is the result of gross negligence or wanton misconduct, to the extent permitted by applicable law. FOR PARTICIPANTS OF MINORITY AGE (UNDER 18): This is to certify that, as parent or guardian with legal responsibility for this participant, I do consent not only to his/her release, but also for myself/ourselves, and my/our heirs, assigns and next of kin, to release and indemnify the Releases from any and all liability incident to my/our minor child's involvement as stated above. I have read this Release of Liability and Waiver Agreement, fully understand its terms and sign it freely and voluntarily.

Signature: _____ Date: _____

(parent or legal guardian must sign for minor)

GEORGIA ARCHERY ASSOCIATION

GEORGIA CUP

Hosted by: GEORGIA ARCHERY ASSOCIATION

TOURNAMENT INFORMATION SHEET

DATE: Saturday & Sunday May 2 & 3 2015

SHOOTING TIME: 9:00 am Both Days

TOURNAMENT FORMAT:

Recurve - 70 Meter Round (60 Meters – Cadets)

2 rounds of 6 ends of 6 arrows for a total of 72 arrows at the 122cm target face

Compounds - 50 Meters Round

2 rounds of 6 ends of 6 arrows at 50 Meters for a total of 72 arrows at the 80cm 6 ring face

Olympic Round Sunday

FITA Round determines Olympic Round ranking for Sunday

Olympic Round determines GEORGIA CUP CHAMPIONSHIP

DIVISIONS: Male Compound, Male Recurve, Female Compound, Female Recurve

SR/JR shoots 70 Meters (CADETS 60 Meters) at the 122 cm face using the FITA Set Format

SR, JR, CADET COMPOUND shoots 50 Meters at the 80cm 6 ring target – 5 ends of 3 arrows per end.

All Participants must have a membership with USA Archery - and must show proof of membership upon registration or mail a copy with your registration. There are several to choose from - see attached sheet or you can go to www.usarchery.org to get your membership for this event.

We will have the ability to register you on-site for a membership if you are not able to obtain one in advance, but a membership is REQUIRED.

VENUE LOCATION:

Earl O'Neal Soccer Complex, Conyers, GA

Take I-20 to exit 84 (Salem Road). Head north on Salem Road. Follow Salem Road until Old Covington Road.

Turn right onto Old Covington Road. Earl O'Neal Soccer Complex on the left.

TOURNAMENT FEE: \$35 per Archer.

Family Discount, 1st Archer full price, additional archers \$15 each, \$50 family max.

Family registrations must be received at the same time to receive discount.

Additional \$15.00 fee for late registrations and walk-in.

SHOOTING TIMES ARE FOR FIRST SCORING ARROW!

ARCHERS SHOULD ARRIVE AND CHECK-IN 1 HOUR BEFORE SHOOTING TIME.

PRACTICE BEGINS 1 HOUR BEFORE SHOOTING TIME.

MAKE CHECKS PAYABLE TO: Georgia Archery Association

SEND COMPLETED FORM WITH FEES TO:

GAA

c/o Stacy McGlashan

644 Cotton Top Road

Claxton, Ga 30417

*******NAA DRESS CODE IS REQUIRED AT ALL TIMES*******

For additional information please email us at georgiaarchery1@aol.com or Mechell Pruitte 706-836-4261

Please sign and return with you registration

PHOTO RELEASE

Photographs and videos are routinely taken at events. 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 t-e 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.