Registration Form (2017 Chinese Archery Program)

March 17th-19th, 2017 (Odum, Georgia, USA) Spots are limited - register soon!

Instructions

- (1) Complete the Registration Form and Waiver of Liability.
- (2) Calculate your fees for registration and rental.
- (3) Write a check to "Jaap Koppedrayer" for registration and rental fees.
- (4) Mail completed forms and registration fees to:
 Jaap Koppedrayer, 3050 Ogden Loop, Odum, GA 31555
 Or, you may scan the forms and email to Jaap at <<u>yumibows@gmail.com</u>>
 and mail in the registration/rental fees separately.

Participant Name:
Mailing Address:
Telephone:
Email:
Dietary restrictions (if any)?
Have you practiced with a bow and arrow before (circle one)? Yes / No
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Have you practiced the thumb draw before (circle one)? Yes / No
Any particular thing you're looking forward to learn or work on during the Program? [Optional]
Registration (and Rental) Fees [Please check one]
Option 1: Registration fee (\$120)
Option 2: Registration fee + bow/arrow rental (\$160)
<pre>Please specify desired draw weight (#) and draw length (inches)*:# @ inches</pre>
Please answer: do you need rental arrows (circle one)? Yes / No
*While we cannot guarantee the rental equipment will exactly match your desired specs, we will try the best we can to accommodate.

Waiver of Liability, Assumption of Risk, and Indemnity Agreement

Waiver of Liability: In consideration of being allowed to participate in the Chinese Archery Program on March 17--19th, 2017 in Odum, Georgia ("Activity"), I, for myself, my heirs, personal representatives or assigns, do hereby release, waive, discharge, and covenant not to sue the Activity's hosts, organizers, instructors, lecturers, and participants ("RELEASEES") from liability from any and all claims INCLUDING THE NEGLIGENCE OF THE RELEASEES resulting in personal injury, accidents or illnesses (including death), and property loss arising from, but not limited to, participation in Activity, observation of Activity, and use of facilities, premises, or equipment.

Assumption of Risks: Archery, by its very nature, carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The purpose of the Activity is to have participants observe and participate in archery activities. These involve strenuous exertions of strength is various muscle groups, and use of archery equipment (bows, arrows, and other equipment aids) that could cause injury if (a) handled improperly or (b) damaged in foreseen and unforeseen ways.

The risks range from (1) minor injuries such as scratches, bruises, and sprains, to (2) major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks, and concussions, to (3) catastrophic injuries including paralysis and death.

I have read the previous paragraphs and I know, understand, and appreciate these and other risks that are inherent in the archery activities provided in the Acitivity. I hereby assert that my participation is voluntary and that I knowingly assume all such risks.

Indemnification and Hold Harmless: I also agree to **INDEMNIFY AND HOLD RELEASEES HARMLESS** from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney's fees brought as a result of my involvement at the Activity and to reimburse them for any such expenses incurred.

Severability: The undersigned further expressly agrees that the foregoing waiver and assumption of risks agreement is intended to be as broad and inclusive as is permitted by the law of the State of Georgia and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Acknowledgment of Understanding: I have read this waiver of liability, assumption of risk, and indemnity agreement, fully understand its terms, and understand that I am giving up substantial rights, including my right to sue. I acknowledge that I am signing the agreement freely and voluntarily, and intend by my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law.

Participant's Name:_ Participant's Signature:_ Date:_
Name of Parent/Guardian (if Participant is minor):_
Signature of Parent/Guardian (if Participant is minor):
Participant's Age (if Participant is minor):
Date: