

# Registration Form (7th Chinese Archery Program)

March 15--17th, 2019 (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 Koppedraye" for registration and rental fees.
- (4) Mail completed forms and registration fees to:  
Jaap Koppedraye, 3050 Ogden Loop, Odum, GA 31555  
Or, you may scan the forms and email to Jaap at <[yumibows@gmail.com](mailto:yumibows@gmail.com)>  
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

Have you practiced the thumb draw before (circle one)? Yes / No

## Registration (and Rental) Fees [Please check one]

Option 1: Registration fee (**\$140**)

Please specify desired weight (#) at your draw length (inches)\*:

\_\_\_\_\_ # @ \_\_\_\_\_ inches

Option 2: Registration fee + bow-only rental (**\$160**)

Option 3: Registration fee + arrow-only rental (**\$160**)

Option 4: Registration fee + bow & arrow rental (**\$180**)

\*Although we cannot guarantee the rental equipment will exactly match your desired specs, we will try the best we can to accommodate.

## Participation Agreement [Signature Required]

I agree that if I do not put in a good faith effort to participate in program activities (including morning meditation), organizers reserve the right to assign me to kitchen duties or to dismiss me from the program without refund.

Participant signature: \_\_\_\_\_

**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 15--17th, 2019 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 in 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 Activity. 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: \_\_\_\_\_



