KAC Waiver Information

Included in this package

USA Archery Photo Release, Code of Conduct, & Waiver NFAA Waiver/Release Kennesaw Archery Photo Release

Complete the forms

Register with USA Archery, NFAA or ASA prior to filling out the KAC membership application (include copy of member card with application) Complete the KAC Membership Application Sign all waivers

Payment: Cash or checks preferred. Credit/debit cards accepted at range during lessons with a small fee.

Facebook & Club Communications: Like us on Facebook so that you have up-to-date information on club activities, events, schedules, and cancellations. Send questions to membership@kennesawarchery.org. Website: www.kennesawarchery.org.

Age: All archers must be at least 9 years old.

Join National Archery Organization prior to turning in KAC membership application: KAC will not accept or hold KAC membership applications without proof of USA Archery, NFAA, or ASA membership. Please include a copy of your card with your application. If applying in person, a digital card may be shown as proof of membership. See below for more information

Waivers: All waivers are valid for one year or expiration date noted on waivers. Each individual or family member must complete the waivers prior using the range.

Youth Archers: For your child's safety, a parent or adult guardian (18 years or older) must be present anytime a youth is at the range. If a minor has driven to the field, they do not need a parent or guardian present. There is no exception to this safety rule!

Parents & Guardians: Parents and guardians must remain behind the shooting line or in the pavilion at ALL TIMES. Parents and guardians may not walk to the target with their child or coach their child during range sessions. Allow your child to maintain their own scorecard – this is an important skill that each archer must learn for competitions and awards. If non-archer siblings attend, they must remain in the pavilion and be supervised at all times.

Orientation: Orientation must be taken before beginner archers can shoot in the regular sessions or before becoming KAC members. Class size will depend on coach availability. Check the calendar on our website for available orientation days. The registration link for the orientation sign-up will open 7 days prior to the event. Participants will be required to purchase personal equipment.

KAC Membership AND National Archery Organization Membership: Please note that USA Archery, NFAA, or ASA membership and KAC Membership are separate memberships. A National Archery Organization membership is required, a KAC membership is not required but is recommended if an archer has their own equipment and wants to use the range other than during session times.

National Archery Organization Membership: USA Archery, NFAA and/or ASA Membership is required for all recreational archers and KAC members.

USA Archery Membership Levels Recreational: Basic membership level: not eligible to participate in USA Archery sanctioned competitions, Junior Olympic Archery Development (JOAD), and Adult Archery Program (AAP). **Youth, Adult, Family, Lifetime, AKA "All-Access Memberships"**: An All-Access Membership is required to enter USA Archery sanctioned competitions or to participate in Junior Olympic Archery Development (JOAD) and Adult Archery Program (AAP).

KAC Recommends a full USA Archery Membership:

We recommend that all archers who think that they might want to join the JOAD or AAP programs or participate in a competition in their first year obtain a full USA Archery membership (Youth, Family, Adult, Lifetime). Recreational members are not eligible to participate in JOAD/AAP or competitions. USA Archery does not have an easy process in place for upgrading memberships.

Family Membership:

Immediate (or legal guardianship) family members living under the same roof. Please note that each member listed on the Family Membership must complete orientation if required and be National Archery Organization members.

KENNESAW ARCHERY CLUB

Membership year: July 1, 20____ - June 30, 20____

	Year of Birth: Age:
Address:	
City, State, Zip:	Phone(s):
Are you a resident of Cobb County?YesNo If no	o, in what county do you live?
ARE YOU A NATIONAL ARCHERY ORGANIZATION	ON (NAO) MEMBER?YesNo (circle all) USA Archery NFAA ASA
If yes, Membership #: Expirati	on Date:/
USA Archery Membership Level: RecreationalY	outhFamilyCollegiateAdultLifetime
understand that my participation at Kennesaw Archery Club is Athlete Code of Conduct and Code of Ethics may be viewed a	agree to be bound by the USA Archery Code of Conduct and Code of Ethics, and s contingent upon my adherence to the Code of Conduct and Code of Ethics. The at usarchery.org.
but not for commercial purposes. With my signature below, I a without compensation or additional permission. I HAVE READ THE RELEASE OF LIABILITY AND ASSUMPTION	eo recording Kennesaw Archery Club events and activities and promoting archery, agree that images taken by or on behalf of the Kennesaw Archery Club may be use ON OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT D SIGN IT FREELY AND VOLUNTARILY WITHOUT INDUCEMENT.
Adult Participants (18 years and older)	
Adult Participants (18 years and older)	Date
Adult Participants (18 years and older) PRINT Name of Adult Participant (Please print clearly)	Date
	Date
PRINT Name of Adult Participant (Please print clearly) Signature of Adult Participant	
PRINT Name of Adult Participant (Please print clearly) Signature of Adult Participant Participants of Minority Age (17 years and younger) F This is to certify that I, as parent/guardian with legal responsit of all the Releases, and from myself, my heirs, assigns, and r	Parent or legal guardian must sign waiver bility for this participant, do consent and agree to his/her release as provided above the fease and agree to indemnify and hold harmless the Releases from for participation in these events and activities and/or the use of related real persona
PRINT Name of Adult Participant (Please print clearly) Signature of Adult Participant Participants of Minority Age (17 years and younger) F This is to certify that I, as parent/guardian with legal responsit of all the Releases, and from myself, my heirs, assigns, and r any and all liabilities incident to my minor child's involvement	Parent or legal guardian must sign waiver bility for this participant, do consent and agree to his/her release as provided above the fease and agree to indemnify and hold harmless the Releases from for participation in these events and activities and/or the use of related real persona
PRINT Name of Adult Participant (Please print clearly) Signature of Adult Participant Participants of Minority Age (17 years and younger) F This is to certify that I, as parent/guardian with legal responsit of all the Releases, and from myself, my heirs, assigns, and r any and all liabilities incident to my minor child's involvement	Parent or legal guardian must sign waiver polity for this participant, do consent and agree to his/her release as provided above the first of kin, I release and agree to indemnify and hold harmless the Releases from for participation in these events and activities and/or the use of related real personal R NEGLIGENCE.
PRINT Name of Adult Participant (Please print clearly) Signature of Adult Participant Participants of Minority Age (17 years and younger) F This is to certify that I, as parent/guardian with legal responsit of all the Releases, and from myself, my heirs, assigns, and r any and all liabilities incident to my minor child's involvement property as provided above, EVEN IF ARISING FROM THEIR	Parent or legal guardian must sign waiver polity for this participant, do consent and agree to his/her release as provided above the sext of kin, I release and agree to indemnify and hold harmless the Releases from the participation in these events and activities and/or the use of related real personal R NEGLIGENCE.

USA ARCHERY

PRINT Name of Minor Participant (Please print clearly)

Membership year: July 1, 20___ - June 30, 20___

Photo Release, Code of Conduct, & Waiver

PLEASE PRINT Archer's Name						ear of Birth:		Age: _	
Address: City, State, Zip:									
Email address:				:					
ARE YOU A NATIONAL ARCH	IERY ORGANIZAT	TION MEM	IBER?	Yes	No	(circle one))	USA Archery	NFAA	ASA
If yes, Membership #:		ation Date: _				(oncid onlo))	00/1/11011019	141701	7.07.
USA Archery Membership Level:	·				ollegiate	Adult _	Lifetime		
PHOTO RELEASE: Photograp and activities for the purposes of pho With my signature below, I agree tha compensation or additional permission	tographing, video reco t images that are taker	ording or stre	eaming the e	event	and promo	ting archery, b	out not for comm	nercial pu	urposes.
CODE OF CONDUCT AND C understand that my participation in th Conduct and Code of Ethics may be	is event is contingent	upon my adł							
 I understand dangers may exist of participating in the archery event my experience and capabilities at Activity may be conducted in facilities to be unsafe, I will immediately diego. I FULLY UNDERSTAND that archer DISABILITY, PARALYSIS, OR Diego. I hereby agree that as organizer of injury to participants and spectate coverage for the venue if so requied. I HEREBY RELEASE, DISCHAR directors, agents, officers, volunte premises on which the Activity tall damages on account caused or a and (b) the negligence of the Releagree that if, despite this release, HARMLESS EACH OF THE RELANY MAY INCUR AS THE RESUITAVE READ THIS WAIVER AND FOUNTAIN SUBSTANTIAL RIGHTS BY SIGNIN NATURE AND INTEND IT TO BE A ALLOWED BY THE LAW, AND AGENOTWITHSTANDING, SHALL CONTERMS. I HAVE SIGNED IT FREEL 	to which this Release and believe I am qualificatives open to the public scontinue that part of the properties of the pr	applies (the ed to engage c during the // the Activity, visks and dar RM ("Risks") use due dilicial harm to the participants TO SUE, Allother participalered one of whole or including neglight against an LTIGATION LAIM WITH IDERSTAND IT FREELY CONDITION OF TO E AND EFF	"Activity"). I a in and con- Activity. I fur which involvingers of BO). gence to en he facility. I is will sign the ND AGREE pants, any spent rescue y of the Release part by (a) regent rescue y of the Release part by TEXPENSES RESPECT O ITS TERM AND WITH IAL RELEATHIS AGREECT. I HAV	under duct the rate state of the policy of t	rstand the ne Activity. agree and we unsafe con INJURY, II he archery taken the Archery violed HAR rs, advertiserein) from the or omiss ations or else named at TORNEY FHICH THIS IDERSTAI ANY INDUF ALL LIANT IS HELEAD THIS	nature of arche I further acknower and that if, ondition. NCLUDING PE range is secunecessary step vaiver form prio MLESS USA Asers, and if app all liability, clasions in organizmergency med bove, I WILL IN EES, LOSS LISS RELEASE AFORD THAT I HACEMENT OR ABILITY TO THE D TO BE INVA	ery activities are owledge that I is at any time, I be ERMANENT Of red and safe to be to provide property and its olicable, owner times, demands zing or conduct lical treatment, NDEMNIFY, SA ABILITY, DAMPLIES. VE GIVEN UP ASSURANCE IE GREATEST ALID THAT THE AND FULLY II.	and acknown am aware selieve con R PARTIA avoid por roof of inson. administration and less, losses, lo	e that the enditions AL otential surance rators, sors of or ctivity her HOLD COST
Adult Participants (18 years an	nd older)					Doto			
PRINT Name of Adult Participant (Please	print clearly)					_ Date_			
Signature of Adult Participant									
Participants of Minority Age This is to certify that I, as parent/guar of all the Releases, and from myself, any and all liabilities incident to my m property as provided above, EVEN If	rdian with legal respon my heirs, assigns, and ninor child's involvemen	sibility for thi d next of kin, nt or particip	is participar , I release a ation in thes	nt, do d nd ag	consent an	d agree to his/ mnify and hold	harmless the	Releases	from
						Date			

PRINT Name	of Parent or	Legal Guardia	an (Please pr	int clearly)

SIGNATURE of Parent or Legal Guardian

NFAA WAIVER

Membership year: July 1, 20____ - June 30, 20____

ARCHERY CLUB WAIVER AND RELEASE OF LIABILITY - READ BEFORE SIGNING

In consideration of being allowed to participate in any way in Kennesaw Archery Club events and activities, the undersigned acknowledges, appreciates, and agrees that

- 1. The risk of injury from archery and other known and unknown events and activities and/or the use of the related buildings, structures, equipment, automobiles, firearms, weapons, ATV's, boats, tree stands, roads, bodies of water, land and all other real and personal property whether owned by archery club or others is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and.
- I acknowledge and agree that the use of archery equipment, firearms and other weapons by myself or others on club premises
 or otherwise are inherently dangerous and high risk activities whether such archery equipment, firearms or weapons are
 discharged by myself or others; and
- 3. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASES or others, and assume full responsibility for my participation; and,
- 4. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
- I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS Kennesaw Archery Club its officers, directors, officials, agents, employees, volunteers, members, guests, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of real property and personal property used to conduct the events and activities ("RELEASES"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASES OR OTHERWISE, TO THE FULLEST EXTENT PERMITTED BY LAW.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Participant's Name:	
Participant's Signature:	Date Signed:
	IPANTS OF MINORITY AGE T THE TIME OF PARTICIPATION)
This is to certify that I, as parent/guardian with legal re- release as provided above of all the Releases, and for indemnify and hold harmless the Releases from any ar	sponsibility for this participant, do consent and agree to his/her myself, my heirs, assigns, and next of kin, I release and agree to and all liabilities incident to my minor child's involvement or participation real and personal property as provided above, EVEN IF ARISING
Name of Parent/Guardian:	
Parent/Guardian Signature:	Date Signed:

Emergency F	Phone Number	er: _(