3 D TA				OFFICE USE:
A CONTRACT		ARCHERY ON	TARIO	A.O. ID #:
ARCHERY	13	Veteransway,Huntsville Phone: 705-571-3 Web: www.archeryon	426	Gender: FEMALE GALE GALE GALE COTHER CATEGORY: PeeWee PreCub
	INDIVI	DUAL MEMB	SERSHIP	Cub Cub Cadet Cadet
				Junior Master 50/60 - Senior
				_
SURNAME:		FIRST NAME:		SINGLE FAMILY
		GENDER: RY DEFAULTS TO SENIOR and	is recorded as 1900-01-01)	LINKED TO: WAIVER SIGNED: YES NO
				DIRECTORY _
			CODE:	
PHONE NUMBER	:	EMAIL:		
PLEASE CHOOS	E A CATAGORY B	BELOW		
Compound Unli	mited	□ Ba	rebow	□ Coach only
Compound Fixe			outh Compound	$\Box$ Judge only
<ul> <li>Hunter</li> <li>Traditional</li> <li>Other:</li> </ul>		□ Compound □ Yo □ Recurve Para	outh Recurve 🗌	□ Not Active
MBERSHIP RATES: P	ay Online with Credit card I	Here https://2mev.com/#!/ı	nemberships/archery-ontaric	
<b>IST#</b> 85432 0140 RT(	001 HST (13%)			before January,15 2023
ndividual Adult	Master, Senior		\$60.00 + process fee \$	+13% = \$67.80
Youth		lb, Pre Cub, PeeWee	\$50.00 + process fee \$	+ 13% = \$56.50
Family Packag	e 2 adult partners an children, under the	nd or including their e age of 18	\$125.00 + process fee \$	+ 13% = \$141.25
Coaches mu EW * COACH 16+ and DO	st have NCPP training and m ES NOT - include shooting or	ust be certified This option is ava	ilable only to those \$40.00 + Proc	Fee \$ = 13% =\$
* Judges		This option is available only to the	nose 16+ and DOES \$40.00 + Proc	Fee \$ = 13% =\$

Each shooting member of a FAMILY MUST sign a separate WAIVER, available on our web site - https://www.archeryontario.ca/ (Children must be under 18 and sign a YOUTH WAIVER)

List family names on the back of this page or on an attached a page – including Surname, First Name, Gender and Birthdate ADDITIONAL MEMBERS information is included - 🛛 YES

REMINDER – if you already hold an A.O. membership – or have held one in the last 5 years, - you can up-date your membership information, or pay your annual membership fees, at the A.O WEB SITE in the secure "MEMBERSHIP PORTAL" at the lower right of the opening screen.	Office Use:
A <u>SIGNED</u> WAIVER <u>MUST</u> be on file. Electronic signature is now accepted.	Cash:
Office Use:	Cheque:
Dessived	M.O:

Waiver Signed: YES	NO	Received:	
Recorded:		Web:	Note:

Office Use:					
Cash:					
Cheque:					
M.O:	. <u></u>				
Online:					
Other:					



## **ARCHERY ONTARIO**

established 1927

13 Veteransway, Huntsville ON P1H 1P3 Ph#705-571-3426 www.archeryontario.ca

## ADULT ACKNOWLEDGEME

Date:

## NT OF RISK and RELEASE OF LIABILITY - for participants OVER the Age of Majority

## There is a potential of personal injury and property damage while attending, or participating in any archery activity. Read this waiver carefully.

The following waiver of all claims, release from all liability, assumption of risk and other terms of this agreement, are entered into by the signer with, and for the benefit of, ARCHERY ONTARIO its directors, officers, employees, volunteers, coaches, officials, business operators, agents and site property owners or occupiers.( The Occupiers is defined in accordance with the definition contained in the Occupiers Liability legislation applicable to the Province of Ontario.)

1. I am aware that there are inherent risks associated with the participation in archery activities. I am aware that those risks include, but are not limited to, the potential for serious personal injury caused by any event or any condition of the facility or equipment where archery is provided/covered by ARCHERY ONTARIO. I understand that the Risks are relative to my own state of fitness and health, and to the awareness, care and skill, with which I conduct myself while participating in an archery activity.

2. I freely accept and fully assume all responsibilities for all Risks and possibilities of personal injury, death, property damage or loss resulting from my participation in an archery activity. I agree that although ARCHERY ONTARIO has taken steps to reduce the Risks and increase safety at our member clubs, it is not possible for ARCHERY ONTARIO to make archers completely safe. I accept the risks and agree to the terms of this waiver even if ARCHERY ONTARIO is found to be negligent or in breach of any duty of care or any obligation to me in my participation in an archery activity.

3. I acknowledge my obligation to immediately inform the nearest club official or official of ARCHERY ONTARIO of any injury that I may suffer during an archery activity. Further, I understand as well, that I may be stopped from participating at any time if my behavior is deemed to be unsafe by an official of a club or of ARCHERY ONTARIO.

4. I confirm that I have reached the age of Majority in the province of Ontario

5. In addition to consideration given to the ARCHERY ONTARIO for my participation in an archery event, I and my heirs, next of kin, executors, administrators and assignees agree:

a) to waive all claims that I have or may have in the future against the ARCHERY ONTARIO

b) to release and forever discharge ARCHERY ONTARIO from all liability for all personal injury, death, property

damage, or loss resulting from my participation in archery due to any cause, including but not limited to negligence (failure to use such care as a reasonable, prudent and careful person would use under similar circumstances), breach of any duty imposed by law, breach of contract or mistake or error of judgment of ARCHERY ONTARIO; and

c) to be liable for and to hold harmless and indemnify ARCHERY ONTARIO from all actions, proceedings, claims, damages, costs demands including court costs and costs of a solicitor and own client basic, and liabilities of whatsoever nature or kind arising out of or in any way connected with my participation in an archery activity.

6. I agree that this waiver and all terms contained are governed exclusively by the laws of the Province of Ontario where the archery activity is provided.

7. I confirm that I have had sufficient time to read and understand each term in this waiver in its entirety, and have agreed to the terms freely and voluntarily, I understand that this waiver is binding on myself, and my Legal Representatives.

Participant's Name:	Signature	
Please Print Clearly		
Participant's Address:	City/Town	