



Michigan Archers Association

MEMBERSHIP APPLICATION

NEW RENEWAL

DATE ____/____/____

NAME _____ PHONE (____) _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

email _____

YOU MUST BE A MEMBER OF A CLUB/SHOP AND REGIONAL ASSOCIATION, WHICH IS CHARTERED WITH M.A.A.

CLUB/SHOP _____ REGIONAL ASSOCIATION _____

FOR ADDITIONAL FAMILY MEMBERS, PLEASE IDENTIFY SPOUSE AND, IF YOUTH, BIRTH DATE.

ADD ON:	GENDER	BIRTH DATE (youth only)
_____	_____	_____
_____	_____	_____
_____	_____	_____

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M.A.A. FEES:	FIRST MEMBER IN FAMILY, INCLUDING MAGAZINE	\$60.00	___
	SPOUSE OR 1 ST ADD UNDER AGE 18:	\$19.00	___
	2 ND ADD UNDER AGE 18:	\$ 14.00	___
	ALL ADDITIONAL ADDS UNDER AGE 18 (per child only)	\$ 14.00	___
	INDEPENDENT YOUTH UNDER AGE 18 (per child only):	\$35.00	___

THESE FEES INCLUDE YOUR MEMBERSHIP INTO THE NATIONAL FIELD ARCHERY ASSOCIATION.

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MAKE YOUR CHECK PAYABLE TO: NATIONAL FIELD ARCHERY ASSOCIATION

MAIL THIS FORM WITH YOUR PAYMENT TO: **Michigan Archers Association
1979 N. Reed Rd.
Sanford, MI. 48657**

Effective: January 1, 2024



Michigan Archery Association

ARCHERY RELEASE AND WAIVER

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 Archery Athlete Code of Conduct, and understand that my participation in this and other Michigan Archery event(s) is contingent upon my adherence to the Athlete Code of Conduct. The code of conduct may be viewed here: <https://www.usarchery.org/resources/usa-archery-code-of-conduct-030620194748.pdf>

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 anyway in any ("Activity") with **Michigan 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 **Michigan 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 the 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) **Michigan 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 **Michigan 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.

_____ Date _____
 Printed Name of Participant Signature of Participant

_____ Date _____
 Printed Name of Witness Signature of Witness

_____ Date _____
 Printed Name Parent/Guardian Signature of Parent/Guardian (Participant Under 18)

All forms must be completed and signed.