



**YOUTH ARCHERY
RELEASE FORM**

Average Joes Archery
3050 Coon Rapids Blvd NW
Suite #116
Coon Rapids, MN 55433
(763) 208-5717

ALL PARENTS OR GUARDIANS OF ANY CHILD (UNDER 18) THAT WISHES TO PARTICIPATE IN ANY PROGRAM OR ACTIVITY MUST COMPLETE THE FOLLOWING *CHILD PROGRAM RELEASE FORM* BEFORE HIS/HER CHILD MAY BEGIN THE PROGRAM OR ACTIVITY. All participants must be at least 7 years of age.

| | | | | |
|---|--|--|-------------|-------------------|
| Child's Name: _____ | | | | |
| <input type="checkbox"/> Male | | <input type="checkbox"/> Female | | Age: _____ |
| Personal Information | | | | |
| Parent or Guardian Name: _____ | | | | |
| Phone Numbers: _____ | | | | |
| Email: _____ | | | | |
| Address: | | Street | City | State |
| | | | | Zip |
| I agree to have my child participate in archery and archery related activities at Average Joes Archery. This may include (but is not limited to) shooting a bow and arrow and being around others shooting a bow and arrow. | | | | |

Special Needs / Allergies / Potential health problems or other comments:

RELEASE / DISCLAIMER

I DO HEREBY ASSUME FULL RESPONSIBILITY FOR ANY AND ALL DAMAGES, INJURIES (INCLUDING DEATH), OR LOSSES THAT MY CHILD MAY SUSTAIN OR INCUR, IF ANY, WHILE ATTENDING, PRACTICING, PARTICIPATING OR WITNESSING IN ANY PROGRAM, SPORT OR PHYSICAL ACTIVITY OCCURRING IN OR ABOUT THE AVERAGE JOES ARCHERY COON RAPIDS, MN PREMISES. I HEREBY ASSUME FULL RISK, WAIVE ALL CLAIMS AND RELEASE AND HOLD AVERAGE JOES ARCHERY INC., ITS INSTRUCTORS, OR PARTNERS OF SAID PROGRAM OR EVENT, INDIVIDUALLY OR OTHERWISE, HARMLESS FOR ANY AND ALL CLAIMS FOR INJURIES OR DAMAGES.

I am fully aware and understand that Average Joes Archery does not have on or about the premises, employ or contract with any medical services, provisions for ordinary or emergency medical services.

I authorize and agree that Average Joe's Archery may take and use photographs, videos or likenesses of myself or my child as needed for its record keeping, advertising, social media and/or public relations projects and that I have no rights to the same and will not be compensated for the same.

In consideration of my child's participation in and the use of the Average Joes Archery facilities, I hereby release and covenant not to sue Average Joes Archery Inc., its owners, shareholders, directors, officers, employees, representatives, agents, and lessees from any and all claims resulting from any physical injury that may occur to my child while participating in any program or event sponsored by Average Joes Archery.

I HAVE READ AND FULLY UNDERSTAND THE ABOVE RELEASE/WAIVER AND FULLY UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING THIS WAIVER VOLUNTARILY.

Parents or guardians must sign if applicant is UNDER 18.

Parent/ Guardian Name (print): _____

Parent/ Guardian Signature: _____ DATE: _____