MINOR WAIVER/RELEASE FORM

Release of Liability for minor participants (read before signing)

In consideration of	, my child/ward, being allowed to
participate in any way in the Algonquin Archers Junior Olympic Archery	
Development (JOAD) Program related events and activities, the undersigned	
acknowledges, appreciates, and agrees that:	

The risk of injury to my child from the activities involved in these programs is significant, including the potential for permanent disability and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,

- 1)FOR MYSELF, SPOUSE, AND CHILD, 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 child's participation; and,
- 2) I willingly agree to comply with the program's stated and customary terms and conditions for participation. If I observe any unusual significant concern in my child's readiness for participation and/or in the program itself, I will remove my child from the participation and bring such attention to the nearest official immediately; and,
- 3)I myself, my spouse, my child, and on behalf of my/our heirs, assigns, personal representatives, and next of kin, HEREBY RELEASE AND HOLD HARMLESS Algonquin Archers Inc, Algonquin Archers Junior Olympic Archery Development Program; their directors, officers, officials, agents, coaches, employees, volunteers, and other participants, sponsoring the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property incident to my child's involvement or participation in these programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

4)I, for myself, my spouse, my child and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY INDEMNIFY AND HOLD HARMLESS all the above Releasees from any and all liabilities incident to my involvement or participation in these programs, EVEN IF ARISING FROM THEIR NEGLIGENCE, 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.

Parent/Guardian Signature	Print Name
Date signed	
UNDERSTANDING OF RISK	
I understand the seriousness of the risks involved my personal responsibilities for adhering to as a participant.	
Participant Signature	Print Name
Date Signed	