# Zoom Mobile Archery
# & Waiver of Liability

**Please read, fill in and sign before you shoot.**

You are advised that archery is a recreational sport with obvious risks and **YOU ARE PARTICIPATING AT YOUR OWN RISK**.
To ensure that you understand this, please read the following and tick **I AGREE.**

I agree to be bound by, and conduct myself in accordance with, Zoom Mobile Archery rules policies and procedures.

I hereby declare that I am not aware of any health issues or disabilities, which would endanger the safety of myself or other members, or if I do have such issues, I will notify the Staff before engaging in any archery related activity.

I hereby consent to the collection and use of my personal images, results, awards, and prizes received. I acknowledge these may be used by Zoom Mobile Archery for websites, social media and publications for the promotion of the sport.

I, for myself and on behalf of my heirs, assigns, personal representatives, and next of kin, I hereby **release** Zoom Mobile Archery, its officers, directors, officials, agent members, guests, other participants, owners, volunteers, and personal property used to conduct events and activities, with respect to any and all injury, disability, death, loss or damage to person or property not responsible to the fullest extent permitted by law.

I am aware that this waiver is ongoing and will apply to all future occasions i participate in Archery at any Zoom Mobile Archery locations. I furthermore acknowledge that this document is contractual and may be relied upon in any proceedings by me, my heirs' executors and assigns.

☐ **I AGREE (this has to be ticked in order to participate)**

My parent or legal guardian has signed this form to consent to my participation.

**Participants Details**: (Please use **BLOCK LETTERS**)

First Name:

Surname:

Date of Birth: / /

Parent/Guardian Full Name

Phone:
Email:

Which School/Vacation Care does your child attend

**Signature:** ..... **Today's Date**: ...../...../.....