2 0 0	SCHEDULE:	Saturday, March 29:	8:30 a.m. – 9:00 a.m. 9:00 a.m. – 9:45 a.m. 10:00 a.m. 11:30 a.m - 12:30 p.m. 12:30 p.m. After Scoring	Check-in and equipment inspection Official practice Score 90/70 meters Lunch approximately Score 70/60 meters Annual ASAA Meeting						
8 A	euozi JA 29	Sunday, March 30:	8:00 a.m. – 8:45 a.m. 9:00 a.m. 10:30 a.m. – 11:30 p.m. 11:30 p.m. 1:30 p.m. approx 2:30 p.m. approx	Official practice Score 50 meters Lunch approximately Score 30 meters 80cm individual targets - multi-face setup Awards Optional OR Round						
R	FORMAT:	FITA Round and Optional OR round (additional fee and awards). Championship is based on the FITA round.								
I Z	DIVISIONS:	Men and Women: Recurve, Compound, Barebow. Masters (50+, 60+, 70+), Senior (18+), Junior (16+), Cadet (14+), Cub (12+), Bowman (up to 12) • Age divisions are based on year of birth.								
O N	LOCATION:	 Ben Avery Shooting Range, 4044 West Black Canyon Blvd., Phoenix, AZ. (this is the AZ CUP field) For a detailed map see <u>http://www.basfaz.com/facility_map.htm</u> For camping and hotels visit: <u>http://www.basfaz.com/where_to_stay.htm</u> 								
A O U	RULES:	 FITA rules apply. Must be a USA Archery & A.S.A.A. member who meets residency requirements to win the FITA Championship. Guests are welcome in all Divisions, but will not compete for State titles. Guest divisions will receive token awards. The OR round will be all ages, mixed gender (2 divisions – all compound, all recurve males and females together) ranked based on the 70m results. The OR is "Open," so all participants are eligible for awards. JOAD distances per NAA. At 30m, all shoot on 80cm multi-face setup. 								
Г	DRESS CODE:	USA Archery Dress Code applies. CAP dress code applies for collegiate archers.								
D	REGISTRATION:	Checks: Sun Devil Archery Mailed to: Sun Devil Archery 1827-D East Kirkland Lane, Tempe, AZ 85281 Postmarked by March 14, 2008 Late fee applied to entries postmarked March 15 till tournament. If you register late, there may not be an award for you.								
0 0	FEES:	AZ Adults \$50.00 A OR Round \$10.00		nces) Guest Adults \$55.00 Guest Youth \$45.00 (JOAD distance) trations add \$25.00 (accepted on a space available basis)						
R	MORE:	BASF no longer allows the use of public coolers filled with water (personal coolers are fine). So, BRING YOUR OWN WATER! The Sun Devil Archers will have a member of the club selling water bottles on site.								

SENIOR AND COLLEGIATE CHAMPIONSHIPS

2008 ARIZONA OUTDOOR SENIOR AND COLLEGIATE CHAMPIONSHIPS REGISTRATION FORM

Name:							
Address:							
	City		Sta	te	Zip		
Phone:	() -		Email:			
Division:		Male	Female Equ	uipment:	Recurve	Compound	Barebow
Age Group:		Senior (18+) Junior (18*)	Collegiate (CAF Cadet (16*)	· <u> </u>	asters 50+ ub (14*)	Masters 60+ Bowman (12*)	Masters 70+ *Age up to and including the entire year of birthday.
College/University:				Year of Bir	rth:	OR round? (add	itional fee and awards) Yes No

Liability Release Form

In consideration of being allowed to participate in the 2008 Arizona Outdoor Senior and Collegiate Championships and/or OR round (Activity), I agree:

1. I understand dangers may be caused by my own actions, or inaction's, the actions or inaction's of others participating in the Activity, and the condition. I understand the nature of the Activity and acknowledge my experience and capabilities and believe I am 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) the Activity 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 the National Archery Association of the US (NAA), Arizona State Archery Association (ASAA), Sun Devil Archery, Arizona State University (ASU), 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 IT'S 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.

Participant's Signature (required):

Printed Name:

Date:

For Athletes under 18 at the time of Participation:

This is to certify, as parent or guardian of this participant, that I do consent for myself and the minor to his/her release of the ASAA, Sun Devil Archery, ASU, the NAA and others from any and all liabilities related to his/her participation in the Activity as stated above.

Parent/Legal Guardian's Signature (required):

Printed Name:

Date: