

Town of Norton
Archery Recreation Program
Application

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Date of Birth: _____

Email: _____

Consent and Release

Please read the consent and release carefully before signing it.

In consideration of my involvement in Town of Norton's Archery Recreation Program, I acknowledge and agree to the following:

- 1) I risk bodily injury, including paralysis, dismemberment and death, as well as loss or damage to personal property.
- 2) I knowingly and freely assume all risk, and I, for myself, and on behalf of my heirs, assign, and next of kin, hereby release, agree to hold harmless and promise not to bring any legal action against the Town of Norton, Ace Archers, Inc., their officers, directors, facilitators, coaches, agents, and/or employees, and other participants, with respect to any and all injury, paralysis, dismemberment, and/or loss or damage to personal property from this date forward to the end of time, except that which is resultant from gross negligence and/or willful or wanton misconduct.

Herby Agreed:

Participants' Signature _____ Date ____/____/____

Participants' Name (PRINT) _____

For Participants of Minority Age (Under 18 at the time of participation)

Parent/Guardian Signature _____ Date ____/____/____

Parent/Guardian Name (PRINT) _____