Youth National Archery Championship 2025 18 - 21 April 2025

Event Terms and Conditions

| Ι, _ | (Participant) declare that: | |
|------|---|--|
| • | In entering this event, I do so in the spirit of good competition and fair play for all. | |
| • | I am aware of and familiar with the World Archery and ARCHERY AUSTRALIA Rules and undertake to abide by these Rules. | |
| • | I have read and understood the rules governing this event and I agree to fully abide by those conditions and by any rulings made under those rules by the Judges, designated Officials, the Organising Committee and/or the Jury of Appeal. | |
| • | I am aware of and familiar with the ARCHERY AUSTRALIA Anti-Doping Policy and undertake to abide by that Policy. | |
| • | I agree to submit to any required doping control tests. | |
| • | I fully understand this declaration and its contents. | |
| Sic | oned: (Participant) Date: | |

Media Consent

I hereby consent to the collection and use of my personal images, results, awards and prizes received.

I acknowledge, these may be used by Archery Australia Inc and published on the Archery Australia Inc website and in newsletters and publications as well as distributed to members.

Signed:______(Parent/Guardian) Date:_____

I further acknowledge that my image, results, awards and prizes may be used by the Organising Committee and media to promote the event.

I understand that my personal information can be viewed by anyone who accesses the Archery Australia Inc website or publications or the general media and that my consent can be withdrawn at any time.

Consent to the disclosure of personal information by publishing on the Archery Australia Inc website, newsletters and other publications.

The consent only applies to the following:

• Photographs of the participant.

- Results of the participant.
- Awards, scholarships, prizes received by the participant.
- Other specific items identified by Archery Australia Inc.

I am aware that by giving this consent, I am permitting personal information about the participant to be published, which can be viewed by anyone who accesses Archery Australia Inc website or other publications, and that if consent were withheld, this publication would not occur.

| I further understand that this consent may be withdrawn by me at any time, upon written notice. I give this consent voluntarily. | | | |
|--|---------------------------|--|--|
| Signed: | (Participant) Date: | | |
| Signed: | _ (Parent/Guardian) Date: | | |
| | | | |
| Medical Consent | | | |
| I authorise the Team Manager / Head Coach / Organising Committee of this event to consent to medical or surgical treatments may be deemed necessary for my son/daughter if it is impractical for prior communication with me and agree to pay all medical and/or dental expenses incurred. | | | |
| Signed: | (Participant) Date: | | |

Signed:______ (Parent/Guardian) Date:_____