



**Date:** 11/13/21 **Location:** Break the Barriers (Indoors)

**Directions:** 8555 N. Cedar Avenue, Fresno, CA. 93720

**Divisions:** recurve-barebow; recurve-sight; genesis; compound freestyle.

**YOUTH (8-17):** Youngster (8-10); Cub (11-12); Youth (13-14); Young Adult (15-17), 60cm face at 12 yards or 40cm at 20 yards. 30 arrow round.

**ADULT:** 45 Arrow round, Vegas 3 Spot @ 20 yards.

**Awards:** 1st, 2nd and 3rd place in **ALL** divisions.

**Schedule: Youth:** Check In 8:00 am, Shoot time 8:30-10 am.

**ADULT/VET** Check-in: 10:30 a.m., open practice 10:30-11:00 a.m., Shoot Time: 11:00-2:00 p.m.

**ADULT/VET** Check-in: 2:00 p.m., open practice 2-2:30 p.m. Shoot time 2:30 pm if neccessary.

Fees: Youth \$25 Adult: \$35

**Registration closes 11/6/21 or when full capacity.**

**Information Contact: Email registration: [jared@breakthebarriers.org](mailto:jared@breakthebarriers.org) BTB #: (559)432-6292 or**

**Fax# (559)432-5995**

**Pay Cash or Check payable to BTB. Credit Card available by phone for Pre-Registration.**

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### Registration Form

Return to: Break the Barriers 8555 N. Cedar Ave. Fresno, Ca. 93720

Name:

Age:

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Address:

City:

State:

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Phone

E-Mail:

Zip:

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**WAIVER:** In consideration of my involvement with Break the Barriers Archery Tournament, I acknowledge, appreciate and agree that: (1) I risk bodily injury, including paralysis, dismemberment, disability and death, as well as the risk of loss or damage to property; (2) I knowingly and freely assume all risk; (3) I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, hereby release, hold harmless and promise not to sue Break the Barriers, the State Archers of California, or the US Archery Association. It's officers, officials and/or agents, with respect to any and all injury and loss arising from my participation, whether caused by negligence, except that which is the result of gross negligence or wanton misconduct. (4) Break the Barriers has the right to refuse any participant. \*I give my consent and approval of myself to be photographed or video taped as part of Break the Barriers, Inc. role of educating the public with our Ability Awareness, Outreach & Education.

Participant's Signature (all participants must sign):

Date:

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**FOR ATHLETES UNDER 18 AT TIME OF PARTICIPATION:** This is to certify, as parent or guardian of this participant, that I do consent to his/her release of the Break the Barriers and others from any and all liabilities related to his/her participation in the Break the Barriers Archery Shoot as stated above.

Parent/Legal Guardian's signature:

Date:

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