



The Mounted Archery Association Of The Americas

Chapter Affiliation Check Off List

Please initial each of the following if you agree to the terms:

____ I agree to post Equestrian State Law, Emergency Contact and MA3 Range Rule signs visible to all members.

____ I agree to abide by all current MA3 rules, regulations and standards.

____ I understand that it is the chapter leaders responsibility to keep appropriate waivers filled out completely and annually, then kept on file for five years.

____ I agree to ensure that all participants in mounted archery activities are current MA3 Members.

____ I understand and acknowledge that our track will be set up consistent with MA3 standards. All course lanes with poles must have "T" or ball tops and be bendable less than 100 pounds. All course lanes with ropes must have break points between poles.

____ I understand and agree that our track should be set up for left and right handed archers if at all possible. If the track is not set up ambidextrous, it must be noted in the registration of all events.

____ I acknowledge that the chapter agrees that all events will be open to any current MA3 member with the discretion of the host or chapter leader. However, participants may be limited due to space, horse availability or other reasonable conditions.

____ In case of accident, I agree to complete the MA3 Accident/Injury Form and send it to the MA3 Secretary.

____ I agree to ensure that all participants under 18 years old will wear a helmet while mounted either on a horse or on an iron horse.

____ I agree to ensure that no firearms, drugs or alcohol will be allowed during mounted archery activities.

____ I understand and agree not to allow dogs on or near the track at any time during mounted archery activities.

____ I agree that as a leader of an MA3 Chapter I must be established in mounted archery or have an MA3 Mounted Archery Mentor.

____ I agree to OFFER four ranking sessions per year for MA3 Members. (If members do not wish to rank, that is okay)

____ I understand that due to a conflict of interest in regards to insurance and MA3 policy, our chapter cannot be affiliated with any other U.S. organizations or committees related to mounted archery. (Although, chapter members may affiliate with any organization of their choice).

____ I understand that the MA3 Insurance policy does not cover equestrian instruction for either the rider or the horse. If I am a riding instructor I will provide proof of equestrian insurance.

____ I acknowledge that the MA3 General Liability Policy does not cover any accidents or injury related to coming off a horse or any personal injury coverage in general.

By signing below, I acknowledge that it is my responsibility to explain these policies and procedures to my members.

Name: _____ Date: _____

MA3 Official: _____ Date: _____