

49 TH ANNUAL PENNSYLVANIA J.O.A.D. STATE INDOOR CHAMPIONSHIP

WHERE: STATE FARM SHOW COMPLEX, 2300 N.Cameron St. Harrisburg PA 17110
WHEN: Saturday April 6, 2019 5:00PM
FEE: \$25.00 per Person
ROUND: JOAD INDOOR ROUND 60 Arrows, 18 meters; two (2) minute limit
AWARDS: Age: 1st, 2nd, 3rd Male/Female Recurve/Compound
MERIT CLASS: 1st, 2nd, 3rd Recurve/Compound Male/Female
OLYMPIC ROUND: 1st Place ONLY Male/Female Recurve/Compound
RULES: FITA Rules and Dress Code!!!!!!! (NO Camouflage)

This tournament is hosted by Clairton JOAD and assisted by many volunteers. This tournament is also held in conjunction with the Pennsylvania State Archery Association (PSAA) Indoor Championship. (NOTE: THE JOAD AND THE PSAA ARE TWO (2) DIFFERENT TOURNAMENTS). The PSAA is a two (2) day tournament held on Saturday April 6TH and Sunday April 7TH 2019. You **MUST** be a member of PSAA to compete in the PSAA portion and you **MUST** register separately from the JOAD Tournament.

You must be a USA archery member to shoot the JOAD shoot
We will be using the A B C D shooting assignment and scoring this year. A calls, B&C score and D witness

We will not have the yeoman or bare bow class this year.

WE WILL HAVE TEAM AWARDS,

Parents and spectators of the young archers
PLEASE : WAIT IN THE SIGN IN AREA UNTIL PSAA IS FINISHED
PLEASE: STAY BEHIND THE BOW RACKS
PLEASE: LEAVE THE FRONT ROW OF CHAIRS FOR THE ARCHERS!!!! THANK YOU.

REGISTRATION DEADLINE: MARCH 19, 2019 **LATE FEE: \$5.00 PER ARCHER**

FEE: \$25.00 PER PERSON

SIGN THE LIABILITY WAIVER AND SEND IT WITH YOUR REGISTRATION

MAKE CHECKS PAYABLE TO "RANDY MCDONALD" AND MAIL TO:

RANDY MCDONALD
1614 MOHRBACH STREET * PITTSBURGH PA 15207
412-445-0627 PHONE (After 6pm and before 11pm) ram32092@comcast.net EMAIL

There will be **NO** confirmation packets sent out, as everyone will shoot the 5:00 pm line. We can accommodate over 200 Archers at one time. So lets talk it up and have a record turnout this year and may everyone shoot their personal best.

Don't forget to join PSAA and shoot their Indoor State Championship Round. Let's make this a Family Weekend of Archery.

See you in Harrisburg at the State Farm Show Complex on April 6, 2019.

MINI OLYMPIC ROUND

The participants in the Mini Olympic Round are determined by the Archer's total score, by class, during the first half of the Annual Pennsylvania JOAD State Indoor Championship. When the Archers have finished shooting ten ends (30 arrows), their scores will be collected and the placement for the Mini Olympic Round will be determined.

Mini Olympic Round Classes: Male and Female for Recurve in each of the following classes - Bowman, Cub, Cadet and Junior; Male and Female for Compound in each of the following classes - Bowman, Cub, Cadet and Junior.

The top four (4) finishers, by total score in the first half of the State Indoor Championship, from each class will compete against each other in the Mini Olympic Round: #4 vs #1; #3 vs #2. The winners of the first match will compete to determine the champion. Each archer will shoot three (3) ends of (3) arrows for a total of nine (9) arrows per round.

There will be only one (1) winner per class/division - Male/Female; Recurve/Compound for each class - Bowman, Cub, Cadet and Junior. NOTE: The winners of the Olympic Round may differ from the Pennsylvania JOAD Indoor Champion.

It is estimated that each end will take approximately eight (8) minutes to shoot and score. Therefore, the Mini Olympic Round should be concluded in approximately forty-five (45) minutes. At the conclusion of the Mini Olympic Round, the awards for the JOAD and the Mini Olympic Rounds will be awarded.

In the event that there is a tie for entrance into or during the Olympic Round, a three (3) arrow shoot off will be conducted. If there is still a tie, a second round of one (1) arrow will be shot. If there is still a tie then the shoot will continue until we have a winner. The determination of the Chief Official is final.

If there are less than 4 archers competing in any of the classes/divisions: A competition will be performed until a champion is declared. If there are only three (3) archers, all three will complete in the first round. The top two (2) archers will then compete to determine a champion. If there are only two (2) archers, then there will be only one (1) round to determine a champion.

Each archer will utilize a vertical three spot target COMPOUND AND RECURVE.

VOLUNTEERS TO ASSIST WITH THE PA JOAD INDOOR CHAMPIONSHIP AND THE OLYMPIC ROUND ARE NEEDED. If you are interested and able to help, stop at the JOAD Championship table in the Farm Show Complex.

Remember, we are all here to help the young archers experience the thrill of archery. Sportsmanship is our guiding principal. Good luck to everyone.



Bud Simon

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April 6, 2019 5:00PM STATE FARM SHOW COMPLEX HARRISBURG PENNSYLVANIA

NAME: _____ DATE OF BIRTH: _____

ADDRESS: _____ USA Member #: _____

CITY: _____ ZIP: _____

CLUB: _____ PHONE: _____

Please circle ALL of the following that pertain to you including preference of 3-spot

SEX	TYPE	MERIT CLASS			AGE CLASS
MALE	RECURVE	PURPLE	BLACK	YELLOW	BOWMAN CUB CADET JUNIOR
FEMALE	COMPOUND	GRAY	BLUE	OLYMPIAN	
IF YOU WANT A 3-SPOT CIRCLE HERE: 3-SPOT					
					BRON. SILVER GOLD

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FEE: \$25.00 PER ARCHER LATE FEE: \$5.00 PER ARCHER

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REGISTRATION FORM

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PHONE: 412-445-0627 (AFTER 6PM AND BEFORE 11PM) NOFAX EMAIL RAM32092@COMCAST.NET

In consideration of my minor being allowed to participate in any('Activity')with the Clairton JOAD state shoot, I agree:

1. I understand the nature of the Clairton JOAD state shoot activities and acknowledge the minor's experience and capabilities and believe the minor is 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 instruct the minor to immediately discontinue further participation in the activity.
2. I fully understand that (a) Clairton JOAD activities involve risks and dangers of serious bodily injury, including permanent disability, paralysis and death (Risks); (b) these risks and dangers may be caused by the minor's own actions. Or inactions, the actions or inactions of other participating in the activity, the condition in which the activity takes place or the negligence of the "releases" named below; (c) there may be other risks and social and economic losses either not know 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 Minor's participation in the activity.

I hereby release, discharge, covenant not to sue, and agree to hold harmless Clairton JOAD, their respective administrators, directors, agents, officers, volunteers, and other participants, any sponsors or, advertisers, and if applicable, owners and lessors of premises on which the activity takes place(each considered one of the "releases" herein) from all liability, claims, damages on my minor's account caused or alleged to be caused in whole or in part by the negligence of the "releases" or otherwise, including negligent rescue operations and further agree that if, despite this release, the minor or anyone on the minor's behalf makes a claim against any of the releases named above, I will indemnify, save and hold harmless each of the releases 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 and it's terms, understand that I have gave up substantial rights by signing it and have signed it freely 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, not withstanding, shall continue in full force and effect.

1 _____
Printed Name of first Participant

2 _____
Printed Name of second Participant

Date _____

Printed Name of Parent or Legal Guardian

Signature of Parent or Legal Guardian