

Compton Traditional Bowhunters

Traditional Bowhunting Archives of North America

Fair Chase Affidavit

To be eligible for entry into the Compton Traditional Bowhunting Archives, an animal must meet or exceed the minimum entry score and have been taken in accordance with all game laws. In addition, the animal must have been taken under the conditions of Fair Chase. In this regard, Fair Chase means that the animal is not taken under any of the following conditions;

- 1) Helpless in a trap, deep snow, or on ice.
- 2) While swimming in water.
- 3) Residing behind any game proof fence or on a game farm.
- 4) By Jacklighting or shining at night.
- 5) From any power vehicle, including auto, boat or ATV.
- 6) In violation of any state or provincial game laws.
- 7) By use of any tranquilizers, firearms or poisons.
- 8) By herding, driving or harassing any animal with any motorized vehicle including automobile, boat, ATV or using an aircraft to land next to any animal or for relaying animal position to hunters on the ground.
- 9) By the use of <u>any electronics</u> attached to either the bow or arrow. Including electronic calls and lighted nocks.
- 10) By any other means that the Archives Committee shall deem as unethical.

For the Purpose of the Compton Traditional Bowhunters, a recurve bow is defined as a bow that when braced the bowstring touches the upper and lower limbs; a longbow is defined as a laminated bow where the bowstring does not touch the limbs when strung; a selfbow is defined as a bow comprised of a single stave or spliced billets, having no glue lines or laminations.

Falsification of any section of this Fair Chase Affidavit will cause the entry to the Archives to be rejected, all current entries of the individual to be removed, and no further entries allowed to be entered. Compton Traditional Bowhunters also reserves the right to accept, reject or remove any entry at its discretion and the decision will be final.

Date of Kill:	Time of Kil	ıı	om (Check One)	Age	Male Female	
Years Bowhunting:	Тур	e of Bow Used:	Recurve	Longbow	Selfbow	
Make of Bow:			Draw Weig	yht:	<u>-</u>	
Type of Arrow:	Wood (Not Self Made)	Self Made V	VoodAlumin	um Carbon	Other	
Total Weight of Arrow (if known)		Broadhead used:			Number of Blades:	
Hunting Method:	Treestand	_ Elevated Stand (Wi	ndmill Etc.)	Ground Blind	Stalking	
Guided: Yes	No (Check One)	If "Yes" Guide	Name (Optional)			
Location of Hit on Ani	mal:	_(Chest, Paunch, Ru	mp, Neck, Body, Etc.)	Shot Dista	nce: Yards	
Recovery Distance:	Yards	Was animal rec	overed the same day	it was hit?	Yes No (Check One)	
NOTE: If animal was paper if extra space		day it was hit, pleas	se provide a complete	e explanation here, o	r use a separate sheet of	
Write explanation her	re					

Animal Position when Shot:	Standing	Walking	Running	Other:					
Location of Kill: Nearest Town, or Geographical Landmark (Mountain, Lake, Etc.)									
County:		State / P	rovince:						
I, Hunters Printed Name, as you want	it to annear on Certificate	DI FASE DRINT CLEARLY	attest that my	(Game Species)	was taken				
entirely by use of a bow and arro									
Chase. I also acknowledge that t which do not require a drying pe	his animal has been		_						
Hunters Signature:					Date:				
Address:									
City:				State:	Zip:				
Day Phone:			Evening Phone:						
(Please print clearly as this infor	matin will be used t	o mail your certific	ate)						
To enter this animal, all data mus (picture may be used in the club made out to Compton Traditiona	newsletter, A Walk i	_							
\$20 DOLLAR INTRODUCTORY MEMBERSHIP OFFER									
As a thank you for entering an armembership for only \$20.00 (US bowhunting.	· · · · · · · · · · · · · · · · · · ·		-	_	· ·				
Last Name		irst Name		Middle Initial	Date of Birth				
Last Name	Г	iist Name		Middle IIItiai	Date of Biltii				
Address:									
City:				State:	Zip:				
Day Phone:	Ev	ening Phone:	Ema	il Address:					
Have you ever been convicted of	a game violation or	felony?	Yes No (Check C	One) If "Yes" pleas	se provide a brief				
explanation on the back of this fo	orm or a separate sh	eet of paper.							
Signature:					Date:				
By signing this applicatin I affirm that reviewed by the membership commi the Archives Secretary; There is no r	ttee and that if I am rej	ected I cannot repeal t	he decision. (Application wi	II be forwarded to the N	Membership Chairman by				

Mail to: Archives Secretary