GUEST FORM

MADOC DISTRICT HUNTERS & ANGLERS

DATE:_____

GUEST OF: _____ MEMBER #_____

GUEST NAME: _____

BOTH SIDES TO BE FILLED OUT BY GUEST

I, _____ of _____,
NAME OF GUEST TOWN/CITY

acknowledge that I voluntarily have chosen to attend as a guest at the Madoc District Hunters & Anglers Shooting Range.

I AM AWARE THAT THESE ACTIVITIES ARE HAZARDOUS ACTIVITIES AND THAT I COULD BE SERIOUSLY INJURED OR EVEN KILLED. I AM VOLUNTARILY PARTICIPATING OR OBSERVING THESE ACTIVITIES WITH KNOWLEDGE OF THE DANGER INVOLVED, AND AGREE TO ASSUME ANY AND ALL RISKS OF BODILY INJURY, DEATH OR PROPERTY DAMAGE, WHETHER THOSE RISKS ARE KNOWN OR UNKNOWN.

BY SIGNING THIS DOCUMENT, I AM WAIVING ANY AND ALL LIABILITY ACTIONS WHICH I MIGHT PURSUE AGAINST Madoc District Hunters & Anglers FOR ANY AND ALL BODILY INJURY OR INJURIES, DEATH OR DEATHS, OR PROPERTY DAMAGE, INCLUDING ANY AND ALL LIABILITY ACTIONS ARISING OUT OF NEGLIGENCE ON THE PART OF Madoc District Hunters & Anglers, ITS AGENTS, OFFICERS, AND/OR MEMBERS.

I verify my agreement of this statement by placing my initials here:_____. Or as a Parent/Guardian; Initial for _____(if participant is under 18): _____

As consideration for being permitted by MADOC DISTRICT HUNTERS AND ANGLERS to attend and /or to observe or participate in the aforementioned activities, I forever release MADOC DISTRICT HUNTERS AND ANGLERS, and their respective directors, officers, employees, volunteers, agents, contractors, and representatives (collectively "Releasees") from any and all actions, claims or demands that I, my assignees, heirs, distributees, guardians, next of kin, spouse and legal representatives now have, or may have in the future, for injury, death, or property damage, related to (i) my participation in these activities, (ii) the negligence or other acts, whether directly connected to these activities or not, and however caused, by any Releasee, or (iii) the condition of the premises where these activities occur, whether or not I am then participating in the activities.

I also agree that I, my assignees, heirs, distributees, guardians, next of kin, spouse and legal representatives will not make a claim against, sue, or attach the property of any Releasee in connection with any of the matters covered by the foregoing release.

I verify that I agree to this statement by placing my initials here _____

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND MADOC DISTRICT HUNTERS AND ANGLERS, AND I SIGN IT OF MY OWN FREE WILL. I also understand this release and waiver shall remain in affect while I am a visitor and/or participant at the MADOC DISTRICT HUNTERS AND ANGLERS.

Signature: _____ Date: _____
RELEASOR or PARENT or GUARDIAN

Print Name : _____

Address : _____

_____ IF YOU ARE UNDER 18 YEARS OF AGE, YOU AND YOUR PARENT OR GUARDIAN MUST SIGN AND INITIAL THIS FORM WHERE INDICATIED.

If signed by Parent or Guardian: I verify that the dangers of the activities and the significance of this Release and Waiver were explained by me to (Name) _____ and they understood them.

Parent or Guardian (Initials) _____