



**I HAVE RECEIVED THE RANGE
SAFETY RULES.**

_____ **INITIAL**

REDLANDS SHOOTING PARK

**RELEASE AND WAIVER OF LIABILITY ASSUMPTION OF RISK, AND
INDEMNITY AGREEMENT (“AGREEMENT”)**

This document affects your legal rights. Please read it before signing it.

I, the below named person being eighteen or older in age, or the legal guardian of the person named below who is under 18, in consideration of the facilities, services, equipment and activities offered by Redlands Shooting Park, its owners, partners, successors, assigns, personal representatives and estate as follows:

ACKNOWLEDGMENT OF RISKS: I UNDERSTAND AND ACKNOWLEDGE that participation in the activities and use of the premises, facilities, equipment and services offered by Releasees bear certain **known risks and unanticipated risks** which could result in INJURY, DEATH, ILLNESS OR DISEASE, PHYSICAL OR MENTAL, OR DAMAGE to myself, to the minor identified below, or my property. **I understand and acknowledge those risks** may result in personal claims against Releasees, or claims against me by spectators or other third parties. These risks include but in no way are limited to the following:

- (1) The risks involved in use of the premises, facilities, equipment and services offered by Releasees;
- (2) the acts, omissions or negligence in any degree of Releasees; or their agents or employees;
- (3) latent or apparent defects or conditions in equipment, property or the facilities provided by Releasees or their agents or employees;
- (4) my own physical condition, or my own acts or omissions;
- (5) rescue, first aid, emergency treatment or services rendered or failed to be rendered by Releasees, or their agents or employees.

I UNDERSTAND AND ACKNOWLEDGE that the above list is not complete or exhaustive, and that other risks, known or unknown, identified or unidentified, **anticipated or unanticipated** may also result in injury, death, illness, disease, **or damage to myself, the minor identified below, or to my property.**

ACCEPTANCE OF RISK AND RESPONSIBILITY. I VOLUNTARILY AGREE, COVENANT AND PROMISE TO ACCEPT AND ASSUME ALL RESPONSIBILITIES, AND RISK FOR INJURY, DEATH, ILLNESS OR DISEASE OR DAMAGE to myself, the minor identified below, or to my property arising from my use of the premises, facilities, equipment and services offered by Releasees.

RELEASE: I, FOR MYSELF AND THE MINOR IDENTIFIED BELOW, VOLUNTARILY RELEASE AND FOREVER DISCHARGE AND COVENANT NOT TO SUE Releasees and their agents or employees, and all other persons or entities affiliated therewith, from any and all liability, claims, demands, actions or rights or action, which are related to, arise out of, or are in any way connected with my use of the premises, facilities, equipment and services offered by Releasees, **including, but specifically not limited to any negligence or fault of Releasees and their agents or employees, whether involved in an activity or not.** I FURTHER AGREE, PROMISE AND COVENANT, ON BEHALF OF MYSELF AND THE MINOR IDENTIFIED BELOW, TO HOLD HARMLESS AND INDEMNIFY Releasees and their agents or employees, and all other persons or entities **from all defense costs, including attorney's fees, or from any other costs incurred in connection with claims for bodily injury, wrongful death or property damage brought by me or on my behalf.**

I FURTHER ACKNOWLEDGE that I am in the best position to determine my physical ability of the minor identified below to participate in the activities contemplated in this agreement, and acknowledge that I am in good physical and mental health, and not suffering from any condition, disease or disablement which would or could potentially affect participation in the activity.

You are hereby notified that if you damage any of the ShotStop Curtains you will be charged \$750 per panel which will be charged to your credit card. Any disputes as to charges, Redlands Shooting Park will exercise all full and available remedies available to us to the collect debt. _____ INITIAL

Print Name of Participant _____

PhoneNumber: _____ Driver's License #(adult) _____

Signature of Parent or Guardian of Minor Participant (under 18 years of age)

Date of Birth (minor): _____ Date of Birth (adult) _____

Current Address: _____

Email: _____

Signature of Participant _____

**7 1/2, 8 or 9 SHOT, LEAD ONLY NOTHING FASTER THAN 1250
FPS, 3 DRAM IS MAX!!!**

You are hereby notified that if you damage any of the ShotStop Curtains you will be charged \$750 per panel which will be charged to your credit card. Any disputes as to charges, Redlands Shooting Park will exercise all full and available remedies available to us to collect debt. _____ INITIAL

Credit Card Authorization Form

Please complete this authorization and return to us.

All information will remain confidential.

Cardholder Name: _____

Billing Address:

Credit Card Type: ___ VISA ___ MASTERCARD ___ DISCOVER

Credit Card Number:

Expiration Date: _____

Card Identification Number (last 3 digits located on the back of the credit card): _____

Printed Name of Cardholder:

Signature of Cardholder:

THANK YOU FOR SHOOTING WITH US AND HELPING US MAKE OUR RANGE THE SAFEST ONE AROUND!

7 1/2, 8 or 9 SHOT, LEAD ONLY NOTHING FASTER THAN 1250 FPS, 3 DRAM IS MAX!!!