

MINOR FIREARMS WAIVER

CHILDS NAMI	E		
DATE OF BIRT	тн	AGE	
PARENT/GUA	ARDIAN NAME		RELATIONSHIP
ADDRESS			
STATE	ZIP	EMAIL	
EMERGENCY	PHONE NUMBER/S		
MEDICAL, AL	LERGIES OR OTHER S	SPECIAL COMMENTS	
-	guardian hereby express	•	hild entering these premises and taking part in shooting
ammunition a	and any and all hazards and any and all hazards and all hazardian	associated with shooting inclu n further agrees that any and	mited to, the discharge of firearms and firing of live uding accidental or negligent discharges, ricochets and all information presented herein does not in any way he interpretation and/or use of any information.
includes the dis	charge of hand guns, rif	les and shotguns while partic	to allow my child to engage in the shooting sports, which cipating in any shooting sports activity. I understand that ge in any unruly or unsafe behavior (initial)
PARENT/G	GUARDIAN SIGNATU	RE	DATE