



**CENTRAL FLORIDA RIFLE AND PISTOL CLUB, INC.**

P.O. Box 621985, Orlando, Florida 32862

**MINOR PARTICIPANT PARENT/GUARDIAN CONSENT FORM,**  
**WAIVER AND RELEASE - Florida Regional SASP Match 12/10-11/2022**

Minor's Name: \_\_\_\_\_

Parent's / Guardian's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship to Minor: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Address: \_\_\_\_\_

D.O.B.: \_\_\_\_\_ Phone No. \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Has The Minor Ever Handled and Fired a Firearm?.....  Yes  No

Drivers Lic. # \_\_\_\_\_ D.O.B.: \_\_\_\_\_

Is The Minor Legally Permitted to Handle or Otherwise Possess a Firearm.....

Phone No. \_\_\_\_\_ Email: \_\_\_\_\_

Does The Minor Know and Follow the NRA Rules for Safe Gun Handling? ....

**AGREEMENT, RELEASE, INDEMNIFICATION, COVENANT NOT TO SUE, AND WAIVER OF LIABILITY**  
**(READ CAREFULLY BEFORE SIGNING)**

By signing below, I agree that my above-named child or ward will abide by all of the Club Policies and Range Rules of Central Florida Rifle and Pistol Club, Inc., and I represent that I understand all of these rules, and was given the opportunity to ask for clarification of any of the rules before signing this Agreement. I understand that Central Florida Rifle and Pistol Club, Inc. reserves the right to eject from the property and the premises any individual who violates any of the Club Policies and Range Rules of Central Florida Rifle and Pistol Club, Inc. or otherwise acts in any unsafe manner as determined by Central Florida Rifle and Pistol Club, Inc. I agree to peaceably leave the property and premises of Central Florida Rifle and Pistol Club, Inc. if I or my child or ward is so ejected. BY SIGNING BELOW, I HEREBY EXPRESSLY GIVE MY PERMISSION, CONSENT, AND AUTHORIZATION TO ALLOW MY ABOVE-NAMED CHILD OR WARD TO POSSESS, HANDLE AND DISCHARGE FIREARMS AND AMMUNITION ON THE PROPERTY AND PREMISES OF CENTRAL FLORIDA RIFLE AND PISTOL CLUB, INC.

In consideration of the acceptance of the participation of my child or ward, directly or as a spectator, observer, range safety officer, match safety officer, volunteer, or in any other capacity whatsoever in any activity, class, lesson, competition, demonstration, use of any firearm range(s) and/or facilities, use of any air gun range(s) and/or facilities, use of any clay target range(s) and/or facilities, use of any action range(s) and/or facilities (including structures, targets, props and/or equipment located and/or used thereon), use of any archery range(s) and/or facilities, use/rental of any firearm, use of the club house, use of the pavilion, use of any vehicle(s) and/or equipment and/or tools, or any other use of the facilities whatsoever of Central Florida Rifle and Pistol Club, Inc. (hereinafter, collectively, "Activity"), I AGREE TO ASSUME THE RISKS incidental to such participation and, on my own behalf, on behalf of my child or ward, and on behalf of my and my child's or ward's heirs, executors and administrators, I RELEASE, INDEMNIFY, HOLD HARMLESS, COVENANT NOT TO SUE, AND FOREVER DISCHARGE the Released Parties defined below, of and from all liabilities, claims, actions, damages, costs or expenses of any nature arising out of or in any way connected with the inherent risk of the Activity including, but not limited to, any injury or damage relating to my child or ward's failure to wear eye protection or ear protection during any such Activity. The Released Parties are Central Florida Rifle and Pistol Club, Inc., its members, shareholders, officers, directors, employees, safety officers, volunteers, agents, representatives, attorneys, insurers, successors and assigns; and its parent, related, affiliated and subsidiary companies. I expressly understand that the term "inherent risk" means those dangers or conditions, known or unknown, which are characteristic of, intrinsic to, or an integral part of the Activity and which are not eliminated even if the Released Parties act with due care in a reasonably prudent manner; and the term "inherent risk" includes, but is not limited to, (1) the failure of any of the Released Parties to warn me or my child or ward of an inherent risk, and (2) the risk that my child or ward, or another participant in any Activity (but not including the Released Parties) may act in a negligent or intentional manner and contribute to the injury or death of my child or ward.

I further agree to indemnify and hold the Released Parties harmless from all liabilities, claims, actions, damages, costs or expenses of any nature arising out of or in any way connected with my participation and/or the participation of my child or ward in any Activity which results in the personal injury or death of anyone whatsoever, or loss or damage to the property of anyone whatsoever (including the loss of use thereof).

This Agreement shall be governed by the laws of the State of Florida, and any legal action arising out of participation by myself, my child or ward in any Activity, or any litigation relating to the enforcement of this Agreement shall be commenced exclusively in either the Circuit Court of the Ninth Judicial Circuit in and for Orange County, Florida, or the County Court in and for Orange County Florida, as appropriate.

In entering into this Agreement, I hereby grant the Released Parties a limited power of attorney and authorization to obtain, at my cost, any and all emergency medical treatment which may be needed by myself, my child or ward as a result of participation in any Activity. For the purposes of this Agreement, emergency medical treatment means medical care or treatment necessitated by a sudden, unexpected situation or occurrence resulting in a serious medical condition demanding immediate medical attention. However, on my own behalf, on behalf of my child or ward, and on behalf of my and my child's or ward's heirs, executors and administrators, I release, indemnify, hold harmless, covenant not to sue, and forever discharge the Released Parties of and from all liabilities, claims, actions, damages, costs or

***(Continued on Back – Please Turn Page Over)***

expenses of any nature arising out of or in any way connected with the exercise or the failure to exercise such limited power of attorney and authorization, whether negligent or otherwise, and the inherent risk associated with the exercise or the failure to exercise such limited power of attorney and authorization.

I expressly agree that this Agreement is intended to be as broad and inclusive as permitted by law, and that if any provision of this Agreement is held illegal, invalid or otherwise unenforceable, the enforceability of the remaining provisions shall not be impaired thereby, and such invalid part, term or provision shall not be deemed part of this Agreement. I further agree that any ambiguities in this Agreement shall not be construed in favor or against any party by virtue of that party having drafted the Agreement. No remedy conferred by any of the specific provisions of this Agreement is intended to be exclusive of any other remedy, and each and every remedy shall be cumulative and shall be in addition to every other remedy now or hereafter existing at law or in equity or by statute or otherwise. The election of any one or more remedy hereunder shall not constitute any waiver of the right to pursue other available remedies.

## NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN

**READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, EVEN IF THE RELEASED PARTIES (DEFINED ABOVE) USE REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM THE RELEASED PARTIES (DEFINED ABOVE) IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND CENTRAL FLORIDA RIFLE AND PISTOL CLUB, INC. HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.**

I understand that, as part of any Activity, my photograph and/or the photograph of my child or ward may be taken and I hereby consent to the publication of my likeness by any of the Released Parties or any other person, firm or corporation, in any form or in any kind or type of media whatsoever.

I further agree that in consideration for my child's or ward's participation in any Activity provided by Central Florida Rifle and Pistol Club, Inc. in its capacity as a noncommercial activity provider, or provided by any other noncommercial activity provider on the property or premises of Central Florida Rifle and Pistol Club, Inc., I AGREE TO ASSUME THE RISKS incidental to such participation and, on my own behalf, on behalf of my child or ward, and on behalf of my and my child's or ward's executors and administrators, I RELEASE, INDEMNIFY, HOLD HARMLESS, COVENANT NOT TO SUE, AND FOREVER DISCHARGE the Released Parties of and from all liabilities, claims, actions, damages, costs or expenses of any nature arising out of or in any way connected with my participation or my child's or ward's participation in any such Activity and/or my or my child's or ward's failure to wear eye protection or ear protection during any such Activity. I expressly understand that the Release, Indemnification, Covenant Not to Sue, and Waiver of Liability provisions of this paragraph of this Agreement clearly and unequivocally include and apply to any claims based on the negligence (whether active or passive), ownership of any dangerous instrumentality, ownership of the premises, action or inaction of or by any of the above Released Parties, including, but not limited to, claims for bodily injury, death and property damage or loss of any kind suffered by me or my child or ward as a result of such participation in any such Activity.

I certify that I am twenty-one (21) years of age or older and that I am entering into this Agreement on my behalf and as parent and/or legal guardian of a child or ward under the age of eighteen (18). I expressly understand that the aforementioned Activity includes the discharge of firearms and the firing of live ammunition. I expressly agree that I and my child or ward will wear appropriate eye protection and ear protection while on any firing range. I further certify that I have completely read the foregoing (on both sides of this page) and I expressly agree to all of the provisions of this Agreement.

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SIGNATURE

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DATE