

**RANGE USE WAIVER and RANGE RULES COMPLIANCE AGREEMENT**

I, (Please print) \_\_\_\_\_, my agents, assigns, executors, and/or administrators, in and for consideration of being allowed to enter, and for other valuable considerations do hereby absolutely and unequivocally agree to release and hold harmless Beaufort County Law Enforcement Officers Association, Inc., a North Carolina Corporation, their members, officers, employees, agents, instructors, assigns and successors from any claims, demands, and/or liability, whether claimed by myself or another connected with or arising out of the use of the above facility and/or service. I further agree to comply with all RANGE RULES below and as posted at the facility.

**RANGE RULES**

- Treat all weapons as if they are loaded. Safe weapons handling is the responsibility of the individual. Never assume a weapon handed to you is safe or unloaded.
- Never point a weapon at anything you do not intend to destroy.
- Always be sure of your target and backstop (where the bullet lands).
- Keep your finger off the trigger until you are ready to fire and your sights are on target.
- Alcohol is not permitted on the range. Never mix alcohol or drugs (prescription or otherwise) and firearms.
- Be sure your ammunition and the weapons you are using are compatible.
- Guest conduct and safety are the responsibility of the member. Student safety and conduct are the responsibility of the instructor(s).
- No target material will be mounted or placed ANYWHERE on the range except in the designated target areas where the backstop absorbs the impact of the bullet.
- Pick up all brass, casings and hulls and dispose of properly after you are finished shooting. Leave the range better than you found it.
- Use dumpster for ALL trash and not brass!
- Any safety violation observed by any member of another party shall be reported to a Range Safety Committee member or Executive Committee member as soon as practical.
- For your personal safety, hats, ear and eye protection are required on the range while shooting.

**THIS WAIVER SHALL REMAIN IN EFFECT FOR SO LONG AS I UTILIZE THE REFERENCED FACILITIES.**

**Section I**

(Please circle appropriate) Membership: Active Member/Associate Member/Guest

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

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

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*All invited guests or shooters less than eighteen (18) years of age must remain in the continuous and immediate control of a member in good standing of the BCLEOA, Inc. while utilizing this facility.**

**\*Sections I and II must be completed when person named in Section I is a guest or is less than eighteen years of age.**

**\*Parent or legal guardian must sign for guest/shooters less than eighteen (18) years of age.**

**Section II Sponsoring Member/Parent or Legal Guardian (Please circle as appropriate)**

Name: (Please print) \_\_\_\_\_

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

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

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_