

Rio Grande Renegades

<http://RioGrandeRenegades.org>

SHOOTER INFORMATION & RELEASE (Please Print Legibly)



(Shooter/Observer) _____

Address: _____

City: _____ State: _____ ZIP: _____

Email: _____@_____.

Phone (cell preferred): () _____ - _____

Emergency Contact Name: _____

Emergency Contact Phone (cell preferred): () _____ - _____

Is Shooter a member of the Albuquerque City Range pass program (Circle One) Yes or No

General Release from Liability

Since the use of firearms is dangerous, we require all shooters and observers to assume all risk by reading, understanding, and signing this release.

I hereby acknowledge that I have voluntarily applied to participate in and/or observe the sport of cowboy action shooting and/or related activities including, but not limited to, equestrian events, children's game, and entertainment, food services and merchandise vendors.

AS LAWFUL CONSIDERATION of being permitted to enter upon the premises upon which the RIO GRANDE RENEGADES is conducted and of being permitted to participate in or observe activities or otherwise, use the facilities, I, the undersigned, for my heirs, distributees, legal representatives, next of kin and assigns agree to the provisions set forth below.

I understand that I am participating in a sport which contains dangers, and risks may arise, including but not limited to, accidental injury, the forces of nature and illness. In consideration of the right to participate in these events and the services provided for me by the RIO GRANDE RENEGADES and its agents, I have and do hereby assume the risks associated with such events.

I agree that you may tape and photograph me, and record my voice conversation and sounds, including any performance of any musical compositions(s), during and in connection with my appearance and that you shall be the exclusive owner of the results and proceeds of such taping, photography and recording with the right, throughout the world, an unlimited number of times in perpetuity, to copyright, to use and to license others to use, in any manner, all of any portion thereof or of a reproduction thereof in connection with the Program or otherwise.

I hereby waive any right of inspection or approval of my appearance or the uses to which such appearance may be put. I acknowledge that you will rely on this permission potentially, at substantial cost to you and hereby agree not to assert any claim of any nature whatsoever against anyone relating to the exercise of the permissions granted hereunder.

The contestant shall, at his own expense, defend management and/or all sponsors, their members, or employees from any and all such claims and indemnity, from all liability, damage and cost arising from injuries to person or property occasioned by the act of omission of the contestant.

If signing on behalf of a Minor

Minor's Name _____

Relationship to Minor: _____

Releaser's Name: _____

Signature: _____ Date: _____