FIREARMS FAMILIARIZATION ACTIVITY
RELEASE AND WAIVER OF LIABILITY

I, _____, hereby assume all risks by agreeing to the following:

1. That I am voluntarily participating in a formal firearms familiarization activity. My participation and attendance are completely voluntary.
2. I understand the risks and hazards involved in participating in the activity and I recognize that serious and life-threatening injuries can occur while carrying or using a firearm.
3. I represent that I am physically fit, and I have no medical, psychological, or any other condition which would prevent my full participation in this activity.
4. I realize that liability may arise from negligence or carelessness on the part of the persons or entities being released from dangerous or defective equipment or property owned, maintained, or controlled by them or because of their possible liability without fault.
5. In consideration of being permitted to participate in the activities of the firearms familiarization activity, I agree to assume full responsibility for any and all risks, injuries, or damages, known or unknown, which I might incur as a result of participating in this activity.
6. In further consideration of being permitted to participate in the firearms familiarization activity, I, my legal heirs, executors, administrators, next of kin, successors, or legal representatives knowingly, voluntarily, and expressly waive, release, discharge, hold harmless and promise to indemnify and covenant not to sue **Armed Advantage**, its representatives, officers, officers, directors, members, employees, volunteers, or representatives from any and all injuries or damages of whatsoever kind and nature that I may sustain as a result of participating in the firearms familiarization event, or of direct or indirect use of the information obtained during the event. I understand that this type of activity may result in minor injuries such as bruises and lacerations.
7. I certify that I am over the age of twenty-one (21) years, and I am legally entitled (not a prohibited person) to own, possess or use a handgun and/or firearm.
8. I agree that any provisions of this release are held to be invalid, nevertheless, the balance of the release shall continue in full force and effect.
9. I agree that if the Range Safety Officer (RSO) believes that I am or will be unsafe or dangerous, the RSO may direct my removal from the range and from any further participation in the activity.

I understand that I must sign this release of liability and fully comprehend the structure and nature of the activity, and the risks involved before being allowed to participate in this activity. I have read the above release and waiver of liability and fully understand its contents. I have been informed of all risks involved and I voluntarily agree to the terms and conditions stated above.

_____ _____

Participant Signature Date

_____

Participant Printed Name

_____

Participant Email Address

_____

Participant Phone Number