Signature

## WATERTOWN CONSERVATION CLUB, Inc.

PO Box 233 Watertown, Wisconsin 53094

## INDEMNIFICATION, HOLD HARMLESS, DEFENSE, WAIVER, RELEASE AND ASSUMPTION OF RISK AGREEMENT

* RELEASE AND ASS	OUR TON OF RISK AGREEMENT
Watertown Conservation Club, fo of firearms by him/her and/or anothed discharged on Club Premises, the following	mitted entry to and/use of "Premises" of the r whatever purpose, including, but not limited to, use er, and with full knowledge that firearms used and ("Undersigned") agrees to
behalf of his/hers heirs, next of kin, and executors, expressly release Cluform any and all such claims and lia or alleged negligence on the part of Undersigned acknowledges and activity Undersigned expressly associated are used; and Undersigned	Undersigned, on behalf of himself/herself and on assignees, personal representatives, administrators, ab and Club's members, employees, and/or agents bilities including, but not limited to, claims of actual Club, its members, employees and/or agents. agrees that use of firearms is an inherently dangerous sumes the risk of being on Club Premises where I further expressly assumes the risk of discharging and the firing of live ammunition by himself/herself
and/or another  Undersigned expressly agrees the broad and inclusive as permitted by held invalid or otherwise unenforced shall not be impaired. No remedy considered agreement is intended to be exclusive law or in equity or by statute or other Club shall not constitute any waiver. This agreement binds Undersigned representatives, administrators, and Undersigned acknowledges and he/she understands its terms and is ealso acknowledges and agrees that he	at this agreement by him/her is intended to be as law and that if any provisions of this agreement is able, the enforceability of the remaining provisions onferred by any of the specific provisions of this we of any other remedy now or hereafter existing at erwise. The election of any one or more remedy by of Club's right to pursue other available remedies and his/her heirs, next to kin, assignees, personal
UNDERSIGNED:	Date:
Signature Witness:	Print Name

Print Name