

**Print Name of Witness** 

## Florida Fish and Wildlife Conservation Commission

## FWC Managed Shooting Range - Tenoroc Minor Child Release of Claims and Permission Slip

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Please Print	Date	
Parent/Guardian Name: Last	First	MI
Mailing Address		
City State	Zip Daytime Phone (	)
This form contains a release and waiver of claims which Conservation Commission (FWC) and the Wildlife Foundation your minor child/ward's participation in activities at any FWC In consideration of the opportunity afforded to my minor undersigned, on behalf my child/ward named herein do freely the people of my while ward named below full ward according to the content of the conte	on of Florida their partners, staff, agents and volunteers to managed shooting range. Please read it carefully beform the contraction of the following contractual obligation:	hat may arise in connection with ore signing your name. anaged shooting range, I, the
I, on behalf of my child/ward named below, fully understand range, and do hereby for my minor child/ward's heirs, exec damage or injury to person or property that may occur as a range, and do hereby release, discharge, and covenant no volunteers and do hereby waive and discharge all claims Foundation of Florida their partners, staff, agents and volu harmless FWC and the Wildlife Foundation of Florida their p judgments, of whatever nature, including attorney fees, the child/ward's in any activity at any FWC managed shooting range.	reutors, and assigns knowingly, freely, and voluntarily ass result of my child/ward's participation in activities at any of to sue FWC and the Wildlife Foundation of Florida t for damages that my minor child/ward or I might have unteers for any reason, including FWC's negligence, an partners, staff, agents and volunteers from and against archat may be asserted or entered against any of them	ume all risk and liability for any FWC managed public shooting heir partners, staff, agents and against FWC and the Wildliff agree to indemnify and hold by and all claims, damages, and
NOTICE TO THE MII	NOR CHILD'S NATURAL GUARDI.	AN
READ THIS FORM COMPLETELY YOUR MINOR CHILD ENGAGE IN A AGREEING THAT, EVEN IF THE COMMISSION (FWC) AND THE PARTNERS, STAFF, AGENTS AN PROVIDING THIS ACTIVITY, THERE INJURED OR KILLED BY PARTICIF CERTAIN DANGERS INHERENT IN ELIMINATED. BY SIGNING THIS FORM YOUR RIGHT TO RECOVER IN FLORIDA THEIR PARTNERS, STAFF ANY PERSONAL INJURY, INCLUDING DAMAGE THAT RESULTS FROM THAS THE RIGHT HAS THE RIGHT TO REFUSE TO SIGN THIS FORM.  On behalf of myself and/or my child/ward, have read the Repeal of my child/ward, have waived substantial rights by assurance of any nature, and intend it to be a complete and a Waiver of Claims is held invalid by a court of competent jurison.	A POTENTIALLY DANGEROUS ACTION FLORIDA FISH AND WIDLIFE WILDLIFE FOUNDATION OF NO VOLUNTEERS USE REASONE IS A CHANCE YOUR CHILD MAPATING IN THIS ACTIVITY BECATHE ACTIVITY WHICH CANNOT ORM YOU ARE GIVING UP YOU FROM FWC AND THE WILDLIFE F, AGENTS AND VOLUNTEERS IN NG DEATH, TO YOUR CHILD OF THE RISKS THAT ARE A NATURE TO REFUSE TO SIGN THIS FOR LET YOUR CHILD PARTICIPATE Release and Waiver of Claims and fully understand its tesigning this release, and I have signed it freely and with unconditional release of any and all liability, and agree that	CTIVITY. YOU ARE CONSERVATION FLORIDA THEIR NABLE CARE IN AY BE SERIOUSLY AUSE THERE ARE BE AVOIDED OR R CHILD'S RIGHT FOUNDATION OF N A LAWSUIT FOR ANY PROPERTY AL PART OF THE M, AND THE FWC IT YOU DO NOT
Print Name of Minor Child/Ward	Child's Date of Birth	Month Day Year
Print Name of Parent/Guardian	Signature of Parent/Guardian	

Signature of Witness