AGREEMENT TO ASUME RISKS AND FULLY RELEASE ALL CLAIMS Youth Shooting Sports Association (YSSA) Participant / Volunteer



Form: F400-585

Risk of YSSA's Activities. I understand that my participation in YSSA's activities can present risks of physical injury (including death& disability) to me and damage to my personal property. YSSA or its representatives does not guarantee my personal health or safety or protect me against property loss. Physical injury to me or property damage may result from unknown or unexpected risks arising from things such as: use of equipment, materials, or facilities, environmental conditions, including poisonous plants, insects, and extreme heat or cold and other weather-related hazards; natural disasters; water activities; transportation; actions of others; animal behaviors; unavailability of immediate of inadequate emergency care; infectious diseases; and slips and falls.

<u>Risks of YSSA's Shooting Sports Activities:</u> Shooting sports involve the use of firearms, live ammunition, archery equipment, or any other shooting sports related item. I understand there is inherent dangers associated with my participation or involvement in or around the shooting sports activity, including observation. The potentials of dangers include, among other things, gunshot or archery wounds that can result in paralyses, loss of vision, limb, or life. Or other catastrophic medical or mental disability.

Assumption of risk and release of clams: In consideration for allowing me to participate in YSSA activities, I voluntarily assume all risk of injury and loss that I may sustain or suffer in the connection with my participation or involvement in the activities or like activities described in this agreement, that I forever and fully release, waive, and discharge all clams, demands, actions and cause of actions, known or unknown, that I have or that may occur to me in the future ("claims") against the board of directors of YSSA, its officers, employees, agents, volunteers, instructors, coaches and representatives (individually a "Releasee") for personal injuries (including death) damage to property, and all liabilities, losses, costs, and expenses (Including attorney fees) arising out of or resulting from my participation or involvement in any YSSA activity including all Claims arising, in whole or in part, from the negligence of any releasee. This agreement is binding on my heirs, assigns, and representatives.

Effective Date: This agreement effective on date signed by me ("Effective Date") and replaces any similar agreements previously signed by me as to YSSA activities that occur on or after the effective date.

PARTICIPANT / VOLUNTEER SIGNATURE:		_DATE:
PRINTED NAME:	_BIRTHDATE:	
ADDRESS:	CITY:	
STATE: ZIP: PHONE:	EMAIL:	
IF PARTICIPANT / VOLUNTEER IS UNDER 18 YEAR	S OLD:	
PARENT / LEGAL GARDIAN SIGNATURE:		_DATE:
PRINTED NAME:		
IF DIFFERENT FROM PARTICIPANT / VOLUNTEER		
ADDRESS:	CITY:	
STATE:ZIP:PHONE:	EMAIL:	