

DIRECTORATE OF FAMILY AND MORALE, WELFARE AND RECREATION (DFMWR) RECREATIONAL SHOOTING COMPLEX (RSC)

WAIVER AND HOLD HARMLESS AGREEMENT

NOTE: BY EXECUTING THIS DOCUMENT YOU WAIVE CERTAI YOUR DEPENDENT CHILD. YOU SHOULD READ THIS DOCUM	N LEGAL RIGHTS ON BEHALF OF YOURSELF, YOUR FAMILY OR
	I have read the Range Rules and understand them
Name:	Signature:
Name(s) of child(ren) participating, if applicable:	I have viewed the range orientation video.
	Signature:
	olgitature
The RSC incorporates Archery, skeet and trap, rifle and pistoperated by the Directorate of Family and Morale, Welfare a	tol ranges for authorized users and their guests. The complex is and Recreation.
Initial either or both of the following paragraphs, if app	licable:
 I desire to utilize the RSC and its facilities. I desire that the above-named child(ren) utilize t 	he RSC and its facilities
	facilities, I hereby agree to release and hold harmless the United roperty or injuries which I and/or my dependent child/ward may
in physical or emotional injury, paralysis, death or dama	nplex entails known and unanticipated risks which could result age to myself (or to my child or children if I am executing this property, or to third parties. I understand that such risks seential qualities of the activity.
projectiles, accidental discharge of weapons, misfiring firearms. I understand that the RSC will be utilized by o	e risk of injury, death or property damage from ricocheting weapons and other incidents that could occur during the use of ther persons besides myself, and that not all patrons possess the use thereof, which constitutes another potential risk.
children's participation) in this activity is purely voluntary and spite of the risks. Specifically, I agree to release and hold have all liability and claims for damages to property or injuries to my/his/her participation in this event. Further, I agree to releagainst any claims, demands, actions, debts, liabilities, judgof, or in any manner predicated upon his/her use of Fort Ber	the risks existing in this activity. My participation (or my child's or d I elect to participate (or to allow my child or children to do so) in armless the United States, its officers and its agents, from any and myself and/or my child/ward that may arise or be incident to ease and hold harmless the United States, its officers and its agents, ments, costs, or attorney's fees arising out of, claimed on account nning facilities and/or equipment including any loss or damage to ndent child caused in any manner, or contributed to by the United
BY SIGNING, I DECLARE THAT I HAVE READ AND WAIVER AND HOLD HARMLESS AGREEMENT:	VOLUNTARILY ENTER INTO THE TERMS OF THIS
Name:	

Date: _____

VERIFIED BY GOVERNMENT REPRESENTATIVE (RSC STAFF):

Signature (Staff):