

		Compound	NASP	Junior	Senior
		Barebow	Recurve		
		Compound	NASP	Junior	Senior
		Barebow	Recurve		
		Compound	NASP	Junior	Senior
		Barebow	Recurve		
		Compound	NASP	Junior	Senior
		Barebow	Recurve		

Payment:

Number of individuals entering: _____ X \$20.00 = _____

Remember, receipt of payment is required to validate registration (all competitors) and relay time (air rifle only).

Make Checks/Money orders payable to: Montgomery 4-H Shooting Sports

Mail registration/entry form/payment to:

Montgomery 4-H Shooting Sports
 13818 Kershaw St
 Houston, TX 77037

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF THE RISK, CONSENT, AND INDEMNITY AGREEMENT

In consideration of being allowed to voluntarily participate in the 2022 Gulf Coast BB Gun, Air Rifle, and Archery Match and related events and activities (hereinafter "Voluntary Activity"). I, the undersigned, hereby acknowledge and agree to the following:

1. I, the undersigned player participant and/or I, the undersigned parent or guardian, hereby release any and all claims or potential claims against the Montgomery 4-H Shooting Sports Club and its officers, agents, employees, volunteers, successors, assigns or others involved with providing goods and/or services at a Voluntary Activity bb gun shooting competition and related events to be held in Conroe, Texas on or about February 6, 2022 (hereinafter "Released Parties") and I do hereby agree that I shall make no legal or other claim, nor commence any lawsuit against the such persons and entities for, any claims, that I may have, now or the in the future, on behalf of myself and/or my child, arising from and in connection with, any bodily injury and/or property damage, resulting from any cause or related to or in connection with the aforementioned event.

2. I recognize that bb guns and shooting bb guns with and in and around other persons in various settings, and in competition with others is an activity that has some risk of harm. I also recognize that COVID-19 and other virus or disease is primarily spread from person-to-person and can even be spread by people who are not showing symptoms. I further recognize that COVID-19 and other virus or disease may be spread by coming into contact with surfaces or objects that have the virus on it. I recognize and voluntarily accept that the risks of the Voluntary Activity that I am agreeing to participate in and which may bring myself or my child

into contact with persons or objects engaged in the Voluntary Activity, including carrying the virus and that through such contact, I may become infected or infect others with COVID-19 and other virus or disease. I have been fully informed that engaging in this Voluntary Activity could increase my risk of harm, including but not limited to injury from a bb gun or contracting COVID 19 and other virus or disease and the potential to pass the same along to others.

3. I hereby forever release, discharge and acquit Released Parties from any and all claims, including, but not limited to, claims for illness, death, personal injury or damage to property of any nature which may arise from or in connection with participation in the Voluntary Activity, including possible injury due to bb gun, or any exposure or potential exposure to COVID-19 and other virus or disease as part of this Voluntary Activity. I release the Released Parties from responsibility for any such injury or damage, including death, that may result before, during or subsequent to the above-described Voluntary Activity. I agree and covenant not to sue Released Parties for any such injury or damage, including death, which may be caused by presence or participation in the Voluntary Activity or exposure or potential exposure to COVID-19 while engaging in this Voluntary Activity.

4. I agree and bind myself and my heirs, estate, executors, family, and assigns that I will indemnify and hold harmless the Released Parties from any and all loss, including, but not limited to, damage or injury, pain, suffering, illness, financial damage, property damage, or other loss, including death, that may occur as a result of engaging in the Voluntary Activity including any claims brought by third-parties who may have become exposed to COVID-19 by my person, or any objects or surfaces I may have come into contact with, as a result of my engagement in this Voluntary Activity.

5. I do hereby assume and accept all risk and liability for any losses, damages, expenses, personal and bodily injuries (including death), which may be suffered or sustained while engaging in this Voluntary Activity, including, but not limited to a bb gun accident or injury, or other accident or injury arising out of this Voluntary Activity (competitive bb gun shooting event) or otherwise, as a result of exposure or potential exposure to COVID-19 and other virus or disease. Furthermore, I recognize that if I require medical assistance as a result of any exposure to COVID-19 and other virus or disease, I agree to pay any and all costs incurred or occurring as a result of medical testing, injury or illness suffered due to such exposure. I understand neither the Released Parties, nor its insurer, or its workers' compensation policy, provides me any medical or other coverage for injury or loss resulting from COVID-19 and other virus or disease.

6. I agree to abide by all safety guidelines explained to me by any Released Parties. I agree to use the personal protective equipment (PPE) required by the Released Parties and to follow all safety and sanitation protocols prescribed by them. I understand that I may be required to provide my own PPE and I agree to use PPE equipment in the manner approved by the Released Parties.

7. I further understand and agree that if a claim or lawsuit is brought against the Released Parties for any claim released, or any risk or liability assumed, by me, under this Agreement, that I will indemnify the Released Parties and will be responsible for attorney's fees and any costs incurred by the Released Party in defending such action.

8. I expressly agree that I have carefully read this Agreement and understand its effects. This is a binding legal document, an enforceable contract and not a mere recital. It is the intent of the parties that if any part of this Agreement is held invalid, then the remainder of its provisions will remain enforceable to the fullest extent allowable by law.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE, OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

Player Participant Signature and Date:

By signing this Agreement, I am authorized to attend and participate in the Event and accept and agree with each and every provision of the foregoing RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF THE RISK, CONSENT, AND INDEMNITY AGREEMENT.

Player Participant's Name: _____

Print Name Signature _____ Date: _____

Complete the following only if the above individual is under age 18

By signing this Agreement, I authorize the player participant and myself to attend and participate in the Event and accept and agree with each and every provision of the foregoing RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF THE RISK, CONSENT, AND INDEMNITY AGREEMENT.

Parent or Legal Guardian's Name: _____

Parent/Guardian's Signature: _____ Date: _____

Consent for Emergency Medical Treatment

Although everything possible will be done to prevent accidental injuries, I realize that a medical emergency could arise requiring that my child receives First Aid or emergency medical treatment.

I, _____ certify that I am the parent or legal guardian of

_____, and as such, I hereby convey temporary authority to the volunteers of the 2022 Gulf Coast BB Gun and Air Match for the sole purpose of obtaining any First Aid or medical treatment as deemed necessary to care for my child from a duly licensed medical provider. This authority shall extend for the duration of the event, to be held in Conroe, Texas.

Emergency Contact Information

Mailing Address _____

City _____ State _____ Zip _____

Home Phone _____

Mobile Phone _____

The above mentioned minor has the following allergies or medical conditions:

Media Release

Members of the local media as well as members of the Montgomery 4-H Shooting Sports Club, event volunteers, and other clubs will be taking pictures, videos, recordings and other media throughout the event. These images and videos may be used in local media publications or on social media or by Montgomery 4-H Shooting Sports Club. Each Player Participant and Player Participant's parent/guardian understand and agree that they voluntarily participating in a public event.

I hereby consent and grant to unlimited permissions to copyright and use, publish, and republish for purposes of advertising, public relations, trade, or any other lawful use, information about me and reproductions of my likeness (photographic or otherwise), my voice, with or without my name, without any restriction or limitation whatsoever. I hereby waive any right that I (and Minor Player Participant) may have to inspect or approve the copy and/or finished product or products that may be used in connection therewith or the use to which it may be applied.

Player Participant Signature and Date:

By signing this Agreement, I am authorized to attend and participate in the Event and accept and agree with each and every provision of the foregoing RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF THE RISK, CONSENT, AND INDEMNITY AGREEMENT.

Player Participant's Printed Name:

Player Participant's Signature _____ Date: _____

Complete the following, if the above Player Participant is under age 18

By signing this Agreement, I authorize the player participant and myself to attend and participate in the Event and accept and agree with each and every provision of the foregoing RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF THE RISK, CONSENT, AND INDEMNITY AGREEMENT.

Parent or Legal Guardian's

Printed Name: _____

Parent or Legal Guardian's Signature: _____ Date: _____

Event address:

Montgomery County Fairgrounds Exhibit Hall II
9201 Airport Rd.
Conroe, TX 77303

Club mailing address:

Montgomery 4-H Shooting Sports
13818 Kershaw St.
Houston, TX 77037