



Exhibitor Name: \_\_\_\_\_

Chapter FFA/County 4H: \_\_\_\_\_

## RELEASE, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

By signing below, I acknowledge and agree that I have voluntarily agreed (or have given permission to my Minor(s) identified below) to enter onto the grounds to engage in or observe shooting and/or other activities at the Greater Houston Sports Club ("GHSC"). These activities include, but are not limited to, the use and discharge of firearms at GHSC by its members and guests, attendance at social events, target-shooting competitions, everyday use of club, or training at GHSC.

I acknowledge and understand that shooting activities are inherently hazardous and involve both known and unanticipated risks which could result in physical or emotional injury, including minor, moderate or severe injuries up to and including loss of limb, paralysis or death. I further understand that the discharging of firearms and the use of ammunition have inherent dangers that no amount of care, instruction, or expertise can eliminate.

As lawful consideration for being permitted by GHSC to enter onto GHSC, to use its facilities or equipment and/or to engage in or observe shooting and/or other activities at GHSC, as either a Member, a Guest, or a Parent or Guardian of the Minor(s) identified below, I agree as follows:

**ON BEHALF OF MYSELF, MY HEIRS, GUARDIANS, REPRESENTATIVES, ASSIGNS, MINORS OR ANY OTHER PERSON CLAIMING UNDER OR THROUGH ME, I KNOWINGLY, VOLUNTARILY AND EXPRESSLY RELEASE, WAIVE, COVENANT NOT TO SUE AND AGREE TO INDEMNIFY GREATER HOUSTON SPORTS CLUB, ITS OFFICERS, DIRECTORS, SHAREHOLDERS, EMPLOYEES, INSTRUCTORS, VOLUNTEERS, AGENTS AND REPRESENTATIVES, FROM AND FOR ANY AND ALL CLAIMS I MAY HAVE FOR INJURIES OR DAMAGES (INCLUDING PERSONAL INJURY, DEATH, DISABILITY, PROPERTY DAMAGES, OR CLAIMS BASED ON ACTS OR OMISSIONS OF ANY KIND, INCLUDING ATTORNEYS FEES) THAT I OR MY MINOR(S) IDENTIFIED BELOW MAY SUSTAIN AS A RESULT FROM BEING ON GHSC PROPERTY, USING GHSC FACILITIES OR EQUIPMENT, OR ENGAGING IN OR OBSERVING SHOOTING ACTIVITIES, INCLUDING, BUT NOT LIMITED TO, THOSE INJURIES OR DAMAGES CAUSED BY NEGLIGENCE OF GHSC OR OTHER PARTICIPANTS OR PERSONS AT GHSC.**

I agree to abide by GHSC's rules and code of conduct. I certify that I am not and have never been the subject of a criminal or any other proceeding that prevents me from legally owning, handling or possessing firearms under Texas or Federal law, and that I can lawfully own, handle, and possess a firearm.

I further agree that this Agreement, and any signed written amendments or modifications to it, shall remain in full force and effect from today's date and shall apply to each occasion that I or my Minor(s) identified below enter onto GHSC, use its facilities or equipment or engage in or observe shooting and other activities at GHSC.

I further acknowledge that I have signed this Agreement of my own free will, that I understand its contents, and that it may be amended or modified only by a writing signed by me and an authorized agent of GHSC.

By signing below, I ACKNOWLEDGE THAT I HAVE READ AND AGREE TO THIS RELEASE, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, FOR MYSELF AND ANY MINORS IDENTIFIED BELOW UNDER MY GUARDIANSHIP:

Print YOUR OWN Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Relationship \_\_\_\_\_

Print YOUR OWN Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Relationship \_\_\_\_\_

Print YOUR OWN Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Relationship \_\_\_\_\_

Print YOUR OWN Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Relationship \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_