

OHIO 4-H SHOOTING SPORTS

PARENT/GUARDIAN PERMISSION STATEMENT

PARENT/GUARDIAN LIABILITY RELEASE

I hereby give permission for:

to participate in the activities of the Delaware County 4-H Shooting Sports Club. It is my understanding that strict rules of conduct are required and safety habits are a must. Any member considered in violation at any time will be expelled. The Delaware County 4-H Shooting Sports Club will attempt to install all safety requirements in all participants, but cannot assume responsibility for any individual who does not comply.

I further agree not to hold the volunteers and staff, the Ohio State University Extension Service, and the Delaware County 4-H Shooting Sports Club liable for any injuries sustained by my child during any of the Delaware County 4-H Shooting Sports Club activities.

We, the parent(s)/guardian(s) approve of his/her use of firearms, Archery equipment, and ammunition in the Delaware County 4-H Shooting Sports Club program. We agree not to hold the volunteers and staff, the Ohio State University Extension Service, liable for any damage or accidents. We realize that our child will be expelled from the program if he/she fails to follow instructions and safety guidelines.

Signed:

Parent/Guardian printed name:

Relationship:

Date: