EUSTIS GUN CLUB – LAKE COUNTY IDPA RELEASE OF LIABILITY & WAIVER AND ASSUMPTION OF RISK AGREEMENT July 2024-June 2025

NAME:		IDPA #:
ADDRESS:		PHONE:
CITY:	STATE:	ZIP:
EMAIL:		
DRIVER LICENSE STATE AND NUMBER:		EXPIRATION:
EMERGENCY CONTACT:		PHONE:

ASSUMPTION OF RISK. In consideration of being allowed to participate as a guest as the Eustis Gun Club range, I understand, accept, and agree that the risks involved at a gun range are significant and may include personal injury, risk of death and damage of personal property. I choose to participate despite knowing the inherent risks involved, and I personally hereby assume all inherent risks to my person or property.

WAIVER OF RELEASE. In consideration of the Eustis Gun Club, Inc.'s agreement to allow me to use its range; I for myself and on behalf of my heirs, assigns, personal representatives and next of kin voluntarily agree to HEREBY RELEASE, WAIVE, DEFEND, INDEMNIFY, HOLD HARMLESS AND FOREVER DISCHARGE, Eustis Gun Club, Inc. an its employees, officers, agents, members, contractors, other participants, and any other persons or entities ("Releases"), from any and all claims, WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, loss of services, or loss of damage to person or property, or otherwise associated with my presence or participation, whether arising from the negligence of the Releases or otherwise, to the fullest extent permitted by law.

- I understand that it is my obligation to read and abide by the range rules and the general rules of the Eustis Gun Club, and that I will be held responsible for understanding and abiding by such rules.
- By signing this release, I am also certifying that I am not prohibited by Federal, State, or local laws from possessing firearms, and that I am not under the influence of drugs or alcohol.

I have carefully read this release of liability and assumption of risk agreement. I fully understand its terms, and understand that I have given up substantial rights by signing it. I therefore sign it freely and voluntarily without any inducement or prejudice.

This release is valid from the date signed through June 30th, 2025

Signature:_____

Parent/Guardian Signature required if registrant is under 18. Note here if for Minor: Y / N

Parent/Guardian Signature:

I agree that you may tape and photograph me, and record my voice conversation and sounds, and that you shall be the exclusive owner of the results and proceeds of such taping, photography, and recording with the right, throughout the world, an unlimited number of times in perpetuity, to copyright, to use and to license others to use, in any manner, all or any portion thereof or of a reproduction thereof in connection with the Event or otherwise. I further agree that you may use and license others to use my name, voice, likeness and any biographical material concerning me which I provide, in any and all media and in the promotion, advertising, sale, publicizing and exploitation of Lake County IDPA. I further represent that any statements made by me during my appearance are true, to the best of my knowledge, and that neither they nor my appearance will violate or infringe upon the rights of any third party.

Date:_____

Date: