

**WAIVER OF LIABILITY**

**NAME OF EVENT**

**NOTICE:** By executing this document you waive certain legal rights on behalf of yourself and your family. You should read this document carefully before you sign it.

\_\_\_\_\_  
Name of Shooter/Competitor (please print)

In consideration for being permitted to participate in activities on Fort Benning, Georgia, I

\_\_\_\_\_  
(Name of Parent or Guardian)

do hereby agree to waive, indemnify, and hold harmless the United States of America, its agents, servants, and employees from any and all claims, demands, causes of action, liability, judgments, costs and attorney's fees arising out of, claimed on account of, or in any manner predicated upon my trip at Fort Benning, including any claims and actions for property damage or personal injury I receive in connection with such trips. I further agree to indemnify and hold harmless the United States of America, its agents, servants, and employees, and waive liability for any additional claims, suits, or actions for personal injury, loss of consortium, and property damage for which my heirs, executors, administrators, agents, and each of them, may hereafter acquire against the United States of America, its agents, servants, and employees to the extent that such claims, suits, or actions derive from injury, damage, or death that occurs in connection with my trip and participation in the shooting tournament at Fort Benning.

NOTE: All lines below must be complete.

\_\_\_\_\_  
Coach or Competitor Email address

\_\_\_\_\_  
Coach or competitor phone number

Signed and executed on this \_\_\_\_\_ day of \_\_\_\_\_, 2016.  
2017.

\_\_\_\_\_  
Signature of Parent or Legal Guardian

\_\_\_\_\_  
Printed Name of Parent or Legal Guardian

\_\_\_\_\_  
Witness (Print name and Sign)