

Emergency Contact Name:



## **RELEASE AND WAIVER**

The individual named below (referred to as "I" or "me") desires to participate in The Sheepdog Project, LLC ("Activity" or "Activities") provided by the FTA member (the "Member"). As lawful consideration for being permitted by the Member to participate in the Activity, and the intangible value that I will gain by participating in the Activity, I agree to all the terms and conditions set forth in this agreement (this "Agreement").

Address:	Date:	
Student Signed:	Printed Name:	
	I I HAVE READ AND UNDERSTOOD ALL OF THE TERMS OF THIS AGRI TANTIAL LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE THE MEMBE	
supersedes all prior and contemporaneous ubject matter. If any term or provision unenforceability shall not affect any other	sole and entire agreement of the Member and me with respect to the subject mat understandings, agreements, representations, and warranties, both written and of of this Agreement is invalid, illegal, or unenforceable in any jurisdiction, such term or provision of this Agreement or invalidate or render unenforceable such term and shall inure to the benefit of the Member and me and their respective successor	ral, with respect to suc invalidity, illegality, or or provision in any other
RIGHT I MAY HAVE TO A TRIAL I	ONDITIONALLY WAIVE, TO THE FULLEST EXTENT PERMITTED BY APPLY JURY IN ANY LEGAL ACTION, PROCEEDING, CAUSE OF ACTION, IY PARTICIPATION IN THE ACTIVITIES. I CERTIFY AND ACKNOWLEDG ARILY. Initial:	OR COUNTERCLAIN
arbitration administered by the America ("Commercial Rules"). There shall be of arbitration, or in default thereof appointed non-reviewable, and non-appealable and be shall be Los Angeles, California. Except a	g out of or relating to this Agreement, or the breach thereof, shall be determined Arbitration Association ("AAA") under its Commercial Arbitration Rules and a arbitrator agreed to by the parties within twenty (20) days of receipt by responsible to the AAA in accordance with its Commercial Rules. The award rendered by the adding on the parties and may be entered and enforced in any court having jurisdictions may be required by law, neither a party nor the arbitrator may disclose the existent ansent of both parties, unless to protect or pursue a legal right. The arbitrator will have.	d Mediation Procedure andent of the request for arbitrator shall be fina a. The place of arbitration ace, content, or results of
claims, actions, judgments, settlements, in are incurred by the indemnified party aris	old harmless the Member and all other Releasees against any and all losses, damages erest, awards, penalties, fines, costs, or expenses of whatever kind, including reasong out of or related to any third-party claim alleging any bodily injury to or death of by my negligence or other more culpable act or omission (including any reckless of tivities.	onable attorney fees, the
Member, its officers, directors, employees or property damage arising out of or attr	case any and all claims, now known or hereafter known in any jurisdiction through agents, affiliates, members, successors, and assigns (collectively, " <b>Releasees</b> "), on butable to my participation in the Activities, whether arising out of the negligence make or bring any such claim against the Member or any other Releasee, and forever ability under such claims.	account of injury, deather of the Member or an
SERIOUS INJURY, DEATH, AND/OR COMPOUNDED BY NEGLIGENT EMI AM VOLUNTARILY PARTICIPATING	TAND THAT THE ACTIVITIES ARE DANGEROUS ACTIVITIES AND INTERPROPERTY DAMAGE. I ACKNOWLEDGE THAT ANY INJURIES THAT RGENCY RESPONSE OR RESCUE OPERATIONS OF THE MEMBER. I ACI IN THE ACTIVITIES WITH KNOWLEDGE OF THE DANGER INVOLVED AD ALL RISKS OF INJURY, DEATH, OR PROPERTY DAMAGE, WHETHE THERWISE. Initial:	I SUSTAIN MAY B KNOWLEDGE THAT AND HEREBY AGRE
intangible value that I will gain by partici		

Parent / Guardian Signed: Printed Name:

Phone Number:

## **ALTRA FIREARMS**

## ACCIDENT WAIVER AND RELEASE OF LIABILITY FORM

I HEREBY ASSUME ALL OF THE RISKS OF PARTICIPATING AND/OR VOLUNTEERING IN THIS ACTIVITY OR EVENT, including by way of example and not limitation, any risks that may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained, or controlled by them, or because of their possible liability without fault. I certify that I am physically fit, have sufficiently prepared or trained for participation in the activity or event, and have not been advised to not participate by a qualified medical professional. I certify that there are no health-related reasons or problems which preclude my participation in this activity or event.

I acknowledge that this Accident Waiver and Release of Liability Form will be used by the event holders, sponsors, and organizers of the activity or event in which I may participate, and that it will govern my actions and responsibilities at said activity or event.

In consideration of my application and permitting me to participate in this event, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows:

(A) I WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of the entities or persons released, for my death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me including my traveling to and from this event, THE FOLLOWING ENTITIES OR PERSONS: Altra Firearms ) and/or their directors, officers, employees, volunteers,

representatives, and agents, the activity or event holders, activity or event sponsors, activity or event volunteers; (B) I INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in this activity or event, whether caused by the negligence of release or otherwise.

l acknowledge that Altra Firearms and their directors, officers, or volunteers NOT responsible for the acts or failures to act of any party or entity conducting a specific event or activity on behalf of Altra Firearms

I acknowledge that this activity or event may involve a test of a person's physical and mental limits and may carry with it the potential for death, serious injury, and property loss. The risks may include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of participants, equipment, vehicular traffic, actions of other people including, but not limited to, participants, volunteers, spectators, coaches, event officials, and event monitors, and/or producers of the event, and lack of hydration. These risks are not only inherent to participants, but are also present for volunteers.

I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident, and/or illness during this activity or event.

I understand that at this event or related activities, I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the event holders, producers, spousors, organizers, and assigns. The accident waiver and release of liability shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I CERTIFY THAT I HAVE READ THIS DOCUMENT, AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL

Print Participant's Name

Age

Signature (if under 18 years old. Parent or quardian must also sign)

PARENT / GUARDIAN WAIVER FOR MINORS (Under 18 years old)

The undersigned parent and natural guardian does hereby represent that he/she is, in fact, acting in such capacity. has consented to his/her child or ward's participation in the activity or event, and has agreed individually and on behalf of the child or ward, to the terms of the accident waiver and release of liability set forth above. The undersigned parent or guardian further agrees to save and hold harmless and indemnity each and all of the parties referred to above from all liability, loss, cost, claim, or damage whatsoever which may be imposed upon said parties because of any defect in or lack of such capacity to so act and release said parties on behalf of the minor and the parents or legal guardian.

Signature of Parent or Guardian Date Print Participant's Name Age