

North County Shootist Association (NCSA)

**WAVIER OF LIABILITY**

Date \_\_\_\_\_ Name \_\_\_\_\_ AGE \_\_\_\_\_

Address \_\_\_\_\_

CITY \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

E-MAIL \_\_\_\_\_

I choose to freely participate in matches and or recreational shooting sponsored by NCSA (North County Shootist Association). Live ammunition is used while shooting at targets made of wood, steel, cardboard, paper and other material. I know and freely accept the personal risk associated in this sport. I know that no matter how safely matches and recreational shooting are conducted, organized and supervised the risk of personal injury is always present, ranging from minor to severe injuries, including loss of limbs, eyesight and even the possibility of death. These injuries may be from, but not limited to: bullets ricocheting off steel targets, rocks or other objects. I know that injuries may also arise from accidental discharge of firearms, from exploding firearms due to overloads or bore obstruction caused by my self and other shooters on the range. Accidents may also result from improper loading or handling of firearms by any participant.

I recognize the inherent dangers associated with shooting sports and have no intention of handling my firearms in a manner that may be unsafe to others or myself. I am aware of the loud noise of live fire and the ever-present possibility of being struck by rebounding particles. Proper eye protection is mandatory any where on the range. Hearing protection is also a requirement on the range.

In the event that I am injured while recreational shooting or at a match sponsored by NCSA on the Pala Indian Reservation, I will not hold (NCSA) NORTH COUNTY SHOOTIST ASSOCIATION, its CLUB OFFICERS, range officers or members, Chief of the Pala tribal council or members of the Pala Indian Reservation liable regardless of the circumstances surrounding the injury. In the event of my death as a result of shooting firearms at the NCSA Shooting Range on the Pala Indian Reservation by my signing this waiver, I waive the right of any survivor to hold NCSA, its range officers or members, Tribal Chief, tribal officers or members of the Pala Indian Reservation liable regardless of the circumstances resulting in such an occurrence. In the event of my personal negligence, I agree to indemnify NCSA for any loss arising out of such negligence.

Signature \_\_\_\_\_

**I HAVE THE LEGAL RIGHT AND RESPONSIBILITY TO SIGN FOR THE MINOR CHILDREN LISTED BELOW AGE 18 AND UNDER.**

- 1. \_\_\_\_\_ AGE \_\_\_\_\_
- 2. \_\_\_\_\_ AGE \_\_\_\_\_
- 3. \_\_\_\_\_ AGE \_\_\_\_\_
- 4. \_\_\_\_\_ AGE \_\_\_\_\_

**SIGNATURE** \_\_\_\_\_