

# TRAIL'S END RANGE INC.

## Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement

- I declare that there are various risks involved with my participation in shooting activities at the Trail's End Range Inc. To participate at the Trail's End Range, I acknowledge the following:
- I have read and understand the Rules and Procedures. I agree to always abide by these rules.
- I certify that I am physically able and have not been advised against participation in these types of activities by a health professional. I, hereby, authorize medical emergency treatment in the event of an injury.
- I understand that it is my responsibility to act in a safe manner while always participating in shooting activities.
- I agree that if I see any facilities or equipment that I believe to be unsafe, I will advise Chris Arnold of Trail's End Range Inc.
- I am fully aware that there may be risks and hazards, unknown to me, connected with being on the premises and participating in activities. I, hereby elect, to voluntarily enter the Range and engage in these activities knowing that conditions may become hazardous/dangerous to myself and my property.
- I voluntarily assume full responsibility for any risk of loss, property damage or personal injury, including death, that may be sustained by me, or any loss or damage to property owned by me, because of my participation in these activities, whether caused by the negligence of myself, other participants or otherwise.
- I understand that risks include, but are not limited to, injuries or deaths caused by the following: gunshot, the negligence of other participants in the vicinity, faulty equipment, firearms or ammunition provided by myself or other participants, lighting conditions, excessive noise.
- I am aware that the environmental hazards, relating to shooting, are exposure to lead and noise pollution. I accept that it is my sole responsibility to safeguard my own health.
- I understand that I must inform Trail's End Range Inc. immediately in the event that my PAL or ATT is revoked or there is a change in status that effects my ability to legally acquire, possess or be in close contact with firearms or ammunition.
- I understand that if I do not currently have PAL, I can join the range and shoot under the direct and immediate supervision of a licensed member. I understand that direct supervision is a requirement of the Firearms Act. I, also, understand that my date of birth is required on my membership application as per the Firearms Act.

### DISCLAIMER AND WAIVER:

I agree to assume all risks involved in participating in activities at Trail's End Range Inc. The range, their executives, employees, are not responsible for any loss, damage or injury for any reason whatsoever suffered by me or any other person either before, during or after participation. I do hereby agree for myself, my spouse, heirs, executors, administrators and assigns do release and forever discharge the range, executives, employees or agents of any and all claims, demands, damages, costs, expenses, actions or causes of action whether in law or equity in respect to death, injury, loss or damage to person or property however caused, including but not limited to negligence arising or to arise out of my participation.

I declare that I have read, understand and that I agree to the contents of this Disclaimer and Waiver and release of liability in its entirety.

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Name (please print)

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Date

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Signature (Parental or Guardian, if under the age of 18)