

Carolina Sporting Arms Registration Form and Liability Waiver

This form must be completed and presented, prior to shooting. **Note: Signing this form is voluntary; however, participation in all shooting activities is dependent on signing this form. “*” Denotes mandatory fields**

Training Only Prerequisites: You must be a citizen of the United States. If you have been convicted of a felony (including first time offenders), you are not permitted to register/participate in our courses.

Absolutely no alcohol, illegal substances or legal medications that would impair your judgment, vision or hearing may be ingested before or while participating in this activity. **(INITIALS HERE)**

(PLEASE PRINT)

*Name: _____ Date: _____

*Address: _____

*City: _____ *State: _____ *Zip: _____

*Phone: _____ *DOB: _____ *Age: _____

*Sex: **M F** Email Address: _____

*Emergency Contact: _____ *Phone: _____

Concealed Carry Permit #: _____ Exp date: _____

Firearm(s) Make & Model: _____ Caliber or Gauge: _____

Experience: Never fired a gun Limited experience Moderate Experience Expert

LIABILITY WAIVER AND ASSUMPTION OF RISK

I, _____, have registered and anticipate full participation in the activities and training provided and in consideration of the services of **Carolina Sporting Arms, (further referred to herein as “CSA”)** its agents, instructor(s), officers, representatives, directors, volunteers, participants, employees, staff and all other persons or entitled acting in any capacity on behalf of CSA. I hereby fully acknowledge, understand, agree to, release and hold harmless CSA on behalf of myself, acting agents representing both real or personal property, heirs, next of kin, assigns, personal representatives and estate and acknowledge each Article as follows:

1. I acknowledge the risks and dangers that exist in my use of any/all firearms and/or defensive tactics and techniques, and assume the risk(s) which could result in physical and/or emotional injury, paralysis, death, or damage to myself, to property, or to third-parties.

2. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity(ies). The risk(s) include, but are not limited to, among other things: the undersigned or third-parties being shot by a firearm; suffering hearing loss, eye injury or loss, inhalation or contact with airborne contaminants and or flying debris, and being struck anywhere on my person (body). Furthermore, I understand that the CSA staff, have a difficult job to perform and while the CSA staff seeks safety, the CSA staff is not infallible. The CSA staff may be unaware of a participant's fitness or abilities. The CSA staff may give inadequate warnings or instructions, and the equipment used may malfunction.

3. I expressly agree and promise to accept all of the risks existing in this activity. Participation in this activity is purely voluntary, and I elect to participate in spite of the risks. I agree to indemnify and hold harmless CSA, its agents, officers, representatives, directors, officers, volunteers, participants, employees, and staff against loss or expense including attorney's fees, by reason of the liability imposed by law upon CSA. It is further understood and agreed that this **WAIVER AND ASSUMPTION OF RISK** shall (at the option of CSA) defend CSA with appropriate counsel and shall further bear all costs and expenses, including the expense of counsel in the defense of any litigation, mediation and or arbitration suit arising hereunder. It is further agreed that all disputes shall be submitted to binding litigation or arbitration within the State of North Carolina's jurisdiction and venue of CSA's registered office and settled in accordance with the rules of the Court or the American Arbitration Association. I hereby voluntarily release CSA, its agents, officers, representatives, directors, officers, volunteers, participants, employees, and staff, forever (discharge) and agree to indemnify and hold harmless from any and all claims, demands, or causes of action, which are in any way connected with my participation in this activity or my use of any equipment or facilities including any and all, but not limited to, indoor or outdoor shooting ranges, including any such claims

which allege negligent acts or omissions of CSA its agents, officers, representatives, directors, officers, volunteers, participants, staff and employees.

4. I agree to be personally responsible for my own safety. I agree to follow all instructions given by CSA staff immediately, except if I should have any reservations about any of the CSA staff's instructions, I shall, while maintaining safety for myself and others, immediately notify of such. I may choose NOT to participate in any activity that I deem unsafe. I additionally acknowledge that the CSA staff may, at any time, make a judgment call such as but not limited to safety or disorderly conduct, and should I fail to correct my actions after being warned, the CSA staff may use their own discretion and determine whether or not I may continue with the activity. Upon termination I understand that I will have to leave the activity/facility immediately and not be entitled to any refund of monies paid and all materials presented to me on that day or any related materials/equipment to the activity will be returned as property of CSA.

5. I agree that if I am not capable of completing the required demands and/or functions of the activity, I am required to immediately advise the CSA staff. I agree to perform the techniques taught at no greater speed or force level that I am comfortable with and competent at. If unsure of the proper technique, I shall ask for assistance from CSA staff and shall not improvise techniques on my own.

6. I shall immediately notify CSA staff of any injury that I receive, or that I observe injury to any other participant.

7. I agree to make every effort to make all activity areas safe. Should I become aware of any potentially unsafe aspect of the activity area (such as the indoor shooting ranges or training room), including unsafe behavior of other participants, I agree to immediately notify the CSA staff.

8. I agree when arriving, departing and while on CSA property, I must keep all firearm(s) unloaded and cased. Except Law Enforcement and valid Concealed Carry Handgun license holder. When not cased (such as a rental gun), handguns, rifles and shotguns must be carried unloaded with actions open in the muzzle down position, detachable magazines removed/tubes unloaded, with an inserted chamber safety flag. Actions can only be "closed" on an inserted chamber safety flag. **(INITIALS HERE)**

9. I consent to having my photograph taken while participating in CSA activities. These pictures may be displayed in any and all CSA publications, including but not limited to newsletters, the official website, social websites, brochures, advertisements, and any and all media including video, unlimited by CSA.

10. Should an STAFF or any person present at a CSA activity provide transportation in connection with this activity, I acknowledge that such transportation is provided solely as a convenience to me and that it is not part of the activity and that the CSA STAFF, agents, employees, and staff has no responsibility or liability in connection with the transportation.

11. I specifically release the shooting range owner/operator, the activity sponsor(s) and staff, guest instructors, CSA staff, all individuals participating in the administration of the activity, and the Officers and Directors of the shooting range from any and all claims or liability related to the activities that I am choosing to participate in. I agree to indemnify the above mentioned entities and individuals for any and all expenses and liability they incur as a result of any of my conduct related to the CSA activity.

12. I certify that I am not a fugitive from justice, nor under indictment in any Court. **(INITIALS HERE)**

13. I certify that I have not been convicted of a felony, misdemeanor or any crime. **(INITIALS HERE)**

14. I certify that I am not drug or alcohol dependent. **(INITIALS HERE)**

15. I certify that I have not been adjudicated incompetent and have not been committed to a mental institution. **(INITIALS HERE)**

16. I certify that I have never been discharged from the Armed Forces under dishonorable conditions. **(INITIALS HERE)**

17. I certify that I am not an alien illegally in the United States **(INITIALS HERE)**

18. I certify that I have not been convicted of domestic violence or subject to a domestic violence protective order. **(INITIALS HERE)**

19. FOR FEMALE PARTICIPANTS ONLY: I certify that I am not pregnant. **(INITIALS HERE)**

20. I expressly agree that the foregoing Liability Waiver and Release is intended to be as broad as is permitted by the laws of the State of North Carolina. I further agree that if any provisions of this agreement are held to be invalid, nevertheless, the balance of the agreement shall continue in full force and effect.

WHEREFORE, I have had sufficient opportunity to read this entire document, I acknowledge and understand the LIABILITY WAIVER, RELEASE AND ASSUMPTION OF RISK and fully understand its terms. I understand that I am giving up substantial rights, including my right to sue. I acknowledge that I am signing this agreement freely and voluntarily and intend my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law.

PRINT NAME: _____

SIGNATURE REQUIRED: _____