



## RELEASE AND ASSUMPTION OF RISK

In consideration for being allowed to participate in the \_\_\_\_\_ (Name) class at \_\_\_\_\_ (location of class) on \_\_\_\_\_ (date),  
offered by Hawkeye PSD, L.L.C. ("HPSD").

\_\_\_\_\_ ("Student") hereby agrees to each of the following terms and conditions of this Agreement, and has initialed each paragraph below as having been read and understood by him/her:

**Initials:** \_\_\_\_\_ 1. I am aware of and understand and agree to follow the Four Firearm Safety Rules (Treat all firearms as if they are loaded; never point a firearm at anything you are not willing to destroy; keep your finger off of the trigger and out of the trigger guard until you are on a target and ready to fire; always identify your target as well as what is beyond and around it) at all times. I understand that I am also responsible for reviewing and following any/all additional Range Rules, policies and directions of the Event Hosts.

**Initials:** \_\_\_\_\_ 2. I am familiar with and understand the operation of each and every firearm which I will use in the above-referenced class. The word "operation" includes safe handling, loading, unloading and firing of the firearm(s) as well as the appropriate safety mechanisms and operating features of each firearm.

**Initials:** \_\_\_\_\_ 3. I acknowledge and fully understand that I and all others engaged in the class are accepting substantial inherent risks of serious personal injury or death.

**Initials:** \_\_\_\_\_ 4. I recognize that I may be expelled from the class for violation of any of the Safety/Facility Rules or for behavior/statements deemed unsafe/disruptive by HPSD. Decisions regarding expulsion are final.

**Initials:** \_\_\_\_\_ 5. On behalf of myself, my heirs, executors, administrators and assigns, I hereby assume all risk of personal injury/death and accept personal responsibility for any and all damages that may occur as a result of any such personal injury/death as a result of my participation in the class.

**Initials:** \_\_\_\_\_ 6. On behalf of myself, my heirs, executors, administrators and assigns, I hereby waive, release and discharge HPSD, Jonah Fontenot and any/all other instructor/faculty member, as well as their affiliates, officers, directors, owners (members), managers, employees, agents, successors and/or assigns ("Released Parties") from any and all claims, demands, actions or lawsuits seeking damages on account of any personal injury, disability or death occurring to myself or anyone else, caused in whole or in part or alleged to have been so caused by the negligence/recklessness/intent of any of the Released Parties.

**Initials:** \_\_\_\_\_ 7. I agree that this Release and Assumption of Risk shall be interpreted according to Arizona law and that any dispute hereunder shall be resolved pursuant to Arizona law in the appropriate Arizona Court.

**Initials:** \_\_\_\_\_ 8. I understand that photo/video images of me participating in the class may be taken and may be used by HPSD for commercial/promotional/informational purposes, and I hereby agree and consent to allow such use.

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I hereby state that I, the actual signer of this Agreement, am an adult over the age of 21 years (and that, if applicable, I am the legal guardian/parent of the minor student whose name is set forth below), that I am not a Prohibited Possessor of Firearms pursuant to Federal Law, that I have read and initialed each of the above terms and conditions, that I understand everything set forth above and that I have, by signing below, knowingly and voluntarily given up substantial legal rights (of my own and/or of my minor ward).

\_\_\_\_\_  
Signature of Invitee/Guardian:

\_\_\_\_\_  
Printed Name:

\_\_\_\_\_  
Invitee's Address:

\_\_\_\_\_  
Age of Minor: \_\_\_\_\_

\_\_\_\_\_  
Name of Minor Invitee:

Date: \_\_\_\_\_

Emergency Contact Name/Phone Number: \_\_\_\_\_