READ THIS DOCUMENT COMPLETELY BEFORE SIGNING. ITS EFFECT IS TO RELEASE COLORADO STATE UNIVERSITY, ITS GOVERNING BOARD, AND THE STATE OF COLORADO FROM ANY LIABILITY RESULTING FROM YOUR PARTICIPATION IN THE ACTIVITIES DESCRIBED BELOW, AND TO WAIVE ALL CLAIMS FOR DAMAGES OR LOSSES AGAINST THE UNIVERSITY WHICH MAY ARISE FROM SUCH ACTIVITIES.

| Permission for Youth to Participate in the Air Rifle, .22 Rifle, M .22 Pistol, Outdoor Skills and Western Heritage projects | uzzleloading, Air Pistol, Archery, Shotgun, |
|---|---|
| I hereby give permission for | derstand and follow established guidelines for safely handling eaders will offer trainings, and it is our responsibility to lear |
| Release from Responsibility, Assum | ption of Risk, and Waiver |
| PARTICIPANT'S FULL NAME: | |
| DATE OF BIRTH (MO/DAY/YR): | |
| ADDRESS: | |
| HUNTER SAFETY NUMBER: | DATE HUNTER SAFETY CARD ISSUED |
| LOCATIONS OF ACTIVITY (IES): Jerry & Suzanne Clausen Property, 12425 N County Road, Loveland, CO Great Guns Sporting, LLC, 16126 County Road 96, Nunn, CO "The Ranch" Larimer County Fairgrounds, Loveland, CO Berthoud Gun Club, 20498 County Road 1, Berthoud, CO Scott Barber Residence, 52255 County Road 21, Nunn, CO Front Range Gun Club, 697 N Denver Ave, Suite 128, Loveland, CO Estes Park Gun & Archery Club, 200 Community Dr, Estes Park, CO | Fort Collins Archery Range, Fort Collins, CO Colorado Youth Outdoors Swift Ponds, Fort Collins, CO Lon Hagler Outdoor Range, Loveland, CO Northern Colorado Rod & Gun Club, LaPorte, CO Liberty Firearms Institute, 4990 Ronald Reagan Blvd., Johnstown, CO |
| DATE(S) OF ACTIVITIES: START DATE: October 1, 2018 END DESCRIPTION OF ACTIVITIES: All 4-H Shooting Sports practices and | |
| I, the undersigned participant, exercising my own free choice promising to take due care during such participation, hereby release a Governors of the Colorado State University System and Colorado State and entities, against any and all claims, demands, and causes of action whor in equity, relating to injury, disability, death or other harm, to person presence at the above listed activities. I acknowledge that I have been informed of the nature of the a may be associated with my participation in the above-named activities, individually which may occur from known or unknown causes. I understand, accept, against the State of Colorado, The Board of Governors of the Colorado other persons as set forth above. I understand that I am solely respons damage sustained through my participation in normal or unusual acts associated through my participation in normal or unusual acts associated has sufficient time to review and seek explanation of understand them fully, and agree to be bound by them. After careful of Release from Responsibility, Assumption of Risk, and Waiver | and discharge, indemnify and hold harmless The Board of University, and their members, officers, agents, employees natsoever, whether presently known or unknown, either in law or property or both, arising from my participation in and/or ctivities and that I am aware of the hazards and risks which cluding the risks of bodily injury, death or damage to propert and assume all such hazards and risks, and waive all claim State University System, and Colorado State University, and ible for any costs arising out of any bodily injury or propert or ciated with the above-named activities. |
| READ, UNDERSTOOD AND AGREED TO THIS DAY OF _ Signature of Participant whose printed name appears above: | , 20 |
| • | Vitness over 18 years of age (Participant must sign in the presence of the Witness) n must also sign: |
| I, (printed name) | , am the parent or legal guardian of the participant who |
| I, (printed name)has signed above. I have read and I understand the provisions of this doct described above, and I fully enter into and agree to the above Release from | |

Signature of Parent or Legal Guardian (date)

Witness over 18 years of age (Parent or Guardian must sign in the Presence of the Witness)