MICHIGAN 4-H SHOOTING SPORTS

Parental Permission and Acknowledgement of Risk

I/We, the parent(s) (legal guardian) of ________________________________ grant permission for his/her participation in the Michigan 4-H Shooting Sports program. I/We approve the use of firearms, live ammunition, and/or archery equipment, while participating under the supervision of a 4-H certified shooting sports leader. I/We understand that shooting sports are potentially hazardous activities and entail the risk of serious injury. These potential hazards include gunshot or archery wounds and can result in paralysis, loss of vision, limb, or life. I/We know that participation in this activity is entirely voluntary. I/We agree to not hold the 4-H project leaders, County 4-H Extension Council/Committee, State 4-H staff, local extension staff, MSU Extension, or Michigan State University, liable for any injury, loss or claim that may arise from this activity, except insofar as an injury is proximately caused by gross negligence.

I/We realize that our child will be dismissed from the activities/events if he/she fails to follow instructions and safety guidelines. I/we also understand that I/we will be asked to pick up my child immediately if he/she is dismissed from an activity/event.

I/We acknowledge and accept responsibility to sit down with my son/daughter and talk through the importance of listening to instructions and to behaving appropriately.

___________________________________________  __________________________
Parent (Guardian) Signature                               Date

___________________________________________  __________________________
Parent (Guardian) Signature                               Date