

HUNTER SAFETY COURSE PARENTAL RELEASE FORM



We (I), the undersigned, being the parent(s) or legal guardian(s) of

STUDENT NAME:

| LAST | FIRST | MIDDLE | DATE OF BIRTH |
|------|-------|--------|---------------|
|------|-------|--------|---------------|

who is less than the age of eighteen or due to disability or other special circumstance, has the undersigned as legal guardian give him/her permission to attend the Florida Hunter Safety Course.

We (I) understand that participation in the Florida Hunter Safety Course involves instruction on the safe handling and use of firearms, including the firing of rifles and shotguns. Knowing this and in consideration of the above-named child being permitted to attend the Florida Hunter Safety Course, and in consideration of the instructors and the use of the facilities of the Florida Fish and Wildlife Conservation Commission and the Florida Hunter Safety Instructors and other sponsoring organizations:

We (I) hereby waive any claim or cause of action of any nature whatsoever arising as a result of participation in the Florida Hunter Safety Course, or in connection with the use of the aforementioned facilities by my child, or arising from his or her presence on or about the property or facilities of the sponsoring organizations, or his or her association with the instructors or representatives.

Parent or Guardian signature _____ Date _____

Address _____
Street City Zip Code County