



Florida Fish and Wildlife Conservation Commission  
**FWC Managed Shooting Range - Tenoroc**  
**Minor Child Release of Claims and Permission Slip**

Please Print

Date \_\_\_\_\_

Parent/Guardian Name: Last \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Daytime Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

This form contains a release and waiver of claims which, when signed, contractually waives any claims against the Florida Fish and Wildlife Conservation Commission (FWC), the State of Florida, the Wildlife Foundation of Florida and Tenoroc Shooting Sports their partners, staff, agents and volunteers that may arise in connection with your minor child/ward's participation in activities at any FWC managed shooting range. **Please read it carefully before signing your name.**

In consideration of the opportunity afforded to my minor child/ward to participate in activities at the FWC managed shooting range, I, the undersigned, on behalf my child/ward named herein do freely subscribe to the following contractual obligation:

I, on behalf of my child/ward named below, fully understand the risks associated with participation in shooting sports at any FWC managed shooting range, and do hereby for my minor child/ward's heirs, executors, and assigns knowingly, freely, and voluntarily assume all risk and liability for any damage or injury to person or property that may occur as a result of my child/ward's participation in activities at any FWC managed public shooting range, and do hereby release, discharge, and covenant not to sue FWC, the State of Florida, the Wildlife Foundation of Florida and Tenoroc Shooting Sports their partners, staff, agents and volunteers and do hereby waive and discharge all claims for damages that my minor child/ward or I might have against FWC, the State of Florida, the Wildlife Foundation of Florida and Tenoroc Shooting Sports their partners, staff, agents and volunteers for any reason, including FWC's negligence, and agree to indemnify and hold harmless FWC, the State of Florida, the Wildlife Foundation of Florida and Tenoroc Shooting Sports their partners, staff, agents and volunteers from and against any and all claims, damages, and judgments, of whatever nature, including attorney fees, that may be asserted or entered against any of them in connection with my minor child/ward's in any activity at any FWC managed shooting range.

**NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN**

**READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, EVEN IF THE FLORIDA FISH AND WIDLIFE CONSERVATION COMMISSION (FWC), THE STATE OF FLORIDA, THE WILDLIFE FOUNDATION OF FLORIDA AND TENOROC SHOOTING SPORTS THEIR PARTNERS, STAFF, AGENTS AND VOLUNTEERS USE REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM FWC, THE STATE OF FLORIDA, THE WILDLIFE FOUNDATION OF FLORIDA AND TENOROC SHOOTING SPORTS THEIR PARTNERS, STAFF, AGENTS AND VOLUNTEERS IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND THE FWC HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.**

I on behalf of myself and/or my child/ward, have read the Release and Waiver of Claims and fully understand its terms, and understand that I, on behalf of my child/ward, have waived substantial rights by signing this release, and I have signed it freely and without inducement, coercion, or assurance of any nature, and intend it to be a complete and unconditional release of any and all liability, and agree that, if any portion of this Release Waiver of Claims is held invalid by a court of competent jurisdiction, any portion not being held invalid shall remain in full force and effect.

\_\_\_\_\_  
 Print Name of Minor Child/Ward

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 Child's Date of Birth    Month    Day    Year

\_\_\_\_\_  
 Print Name of Parent/Guardian

\_\_\_\_\_  
 Signature of Parent/Guardian

\_\_\_\_\_  
 Print Name of Witness

\_\_\_\_\_  
 Signature of Witness