

REGISTRATION & WAIVER/RELEASE FORM

Name: _____

Course (Circle One): SC-CWP, NRA class, Private Lesson, Other

DOB: _____ Occupation: _____

Address: _____

City: _____ State: _____

Email: _____ Phone# _____

Emergency Contact: _____

Emergency Contact Phone# _____

Previous shooting/handling experience,(if any) _____

Do you have any physical or mental limitations or conditions that we should be aware of which could inhibit your participation in this firearms training course?

PLEASE READ CAREFULLY

I FULLY UNDERSTAND AND ACKNOWLEDGE THAT

I _____ am aware there are inherent risk and dangers in my use of any equipment and facilities, and that my participation in firearms training, or any other activities, will indemnify and hold harmless **Fortress Firearms Training, LLC and Tabares Inc., 285 SC-418 Fountain Inn, SC 29644.**

My participation in such activities and/or use of equipment and the facilities may result in injury, illness, or death due to accidents, the forces of nature, or other unforeseeable causes. Such injuries include, but are not limited to, the risk of serious bodily injury or death. I hereby assume all responsibility for all risks and

dangers occurring during my participation in any activities or use of equipment and facilities. I accept all responsibility for losses and/or dangers whether caused in whole or in part by negligent acts or omissions, intentional or reckless misconduct, or gross negligence by any other person. I, on behalf of myself as my own personal representative, my legal heirs, executors, administrators, next of kin, successors, or legal representatives knowingly, voluntarily, and expressly agree to release, waive, discharge, hold harmless, defend and indemnify **Fortress Firearms Training, LLC & Tabares Inc., 285 SC-418 Fountain Inn, SC 29644**, and their properties, agents, contractors, and employees from any and all claims, actions, or losses resulting from bodily injury, death, property damage, wrongful death, loss of services, or otherwise which may arise out of my use of equipment, facilities, and the participation in firearms training, or any other outdoor activities. I am voluntarily participating in these activities and hereby agree to accept full responsibility for all of the risks involved.

I understand that photos and video may be taken during the course, and agree that my image may be used for advertising and/or posted to social media.

I understand if I create an unsafe situation by pointing a firearm at myself or fellow class members I will be removed from the class without a refund.

I am aware of and accept all risks and liabilities of contracting any and all viruses including but not limited to COVID-19/Coronavirus while here at **Fortress Firearms Training, LLC, & Tabares Inc., 285 SC-418 Fountain Inn, SC 29644, and properties.**

I HAVE CAREFULLY READ AND UNDERSTAND

The above waiver/release of liability and assumption of risk statement. I hereby accept and agree to the above terms and regard this document as legal and binding. I understand that I have given up substantial rights by signing this document and am signing this document voluntarily

Signature: _____ Date: _____

Print Name: _____