



RELEASE OF LIABILITY AGREEMENT - 2017

1. **Voluntary Participation.** I, (name) _____ acknowledge that I have voluntarily applied to lawfully participate in SPORTING CLAYS at the premises of ETOWAH VALLEY SPORTING CLAYS PARK, located at 619 Sporting Hill Dr., Dawsonville, GA 30534.

2. **Assumption of Risk.** I am aware that participating in Sporting Clays is a hazardous activity. I am voluntarily participating in this activity with knowledge of the danger involved, and do hereby agree to accept any and all risks of injury or death, and verify this statement by placing my **initials here:** _____.

3. **Shot size.** I hereby acknowledge that I have been told and will adhere to the rule regarding shot size. I shall not use any shot larger than 7 1/2 (7 1/2, 8, or 9 OK) on the premises of Etowah Valley Sporting Clays Park and I understand that violation of this rule is grounds for immediate expulsion from the Park. I also further understand that should any person be injured by my violation of this rule, said injured person shall have all causes of action available to them to pursue a remedy in civil court and that I may be subject to criminal punishment as well. I acknowledge and agree to this statement by affixing my **initials here:** _____

4. **Release.** As consideration for being permitted by Etowah Valley Sporting Clays Park to participate in these activities and to use all related facilities, I hereby agree that I, my assignees, heirs, distributees, guardians, and legal representative will not make a claim against, sue, or attach the property of Etowah Valley Sporting Clays Park on account of injury or damage resulting from the negligence or other acts, however caused, by any employee, agent, owner, or contractor of Etowah Valley Sporting Clays Park as a result of my participation in sporting clays. I hereby release Etowah Valley Sporting Clays Park from all action, claims, or demand that I, my assignees, heirs, distributees, guardians, and legal representatives now have or may hereafter have from injury or danger resulting from my participation in Sporting Clays.

5. **Golf cart operation.** I agree that Etowah Valley Sporting Clays Park's golf carts may only be driven by persons 16 years of age or older and that the rules of operation found on the steering hub of each cart must be obeyed.

6. **Knowing and voluntary execution.** I have carefully read this release and fully understand its contents. I am aware that this is a release of liability and a contract between Etowah Valley Sporting Clays Park and I and sign it of my own free will.

7. I am aware of their strict rule of **NO HANDGUNS, NO HOME DEFENSE GUNS & NO RIFLES** and anyone found breaking this rule could result in expulsion from Etowah Valley Sporting Clays Park. INTIAL HERE:

Date: _____

Name: _____ Name(s) of Minor(s): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone : (Emergency Contact) _____

Your Cell Phone number is required for **shotgun rentals:** _____ Driver's License required at front desk

Signature

Parent/Guardian (if participant is under 18 years of age)

Clearly print your e-mail address below if you would like to receive our monthly newsletter.

E-mail address: _____