

Rules for Participation

Anderson – Woodford County 4-H Shooting Sports Education Program

1. All participants must complete the Hunter Education Course (KY Department of Fish & Wildlife) and obtain an orange card within six (6) months of joining the club.
2. All equipment is to be brought to the sight of practice unloaded, (firearms with action open, arrows in quiver) and enclosed in some type of casing.
3. All equipment and ammunition must be approved by the corresponding leaders of that discipline.
4. All equipment is to remain unloaded and in cases until members are instructed otherwise by the leaders.
5. NO horseplay of any kind will be tolerated.
6. All leader directions must be followed. When attention of group is called for, members must listen and follow leaders' specific instructions. Full attention is expected while coaches are speaking. NO rudeness will be tolerated.
7. All members must provide their own safety equipment and must wear it at all times when on the firing line. This includes hearing and eye protection for rifle and shotgun, eye protection for BB guns and finger and forearm protection with archery.
8. A parent, guardian, or someone authorized by the parent or guardian must be present during each meeting. (No one is to drop off and leave a child.) Siblings not enrolled as a shooting sports participant are not to be on any range.
9. To participate in the State 4-H Shooting Sports Competition, members must be enrolled in the respective county by June 1. Members must pre-register for the state competition by June 1.
10. Only those members who participate in 50% of scheduled club activities and 50% of scheduled range practices under the instruction of a certified 4-H coach will be eligible to compete in the state 4-H shooting sports competition.
11. The following dress code applies to 4-H shooting sports events: (a) all shirts must have sleeves and cover midriffs; (b) no clothing with vulgar or suggestive language, tobacco, alcohol, racist or sexist comments allowed; (c) length of shorts should be mid-thigh (no short shorts) **(d) closed toe shoes must be worn and no crocs.**
12. Dues should be paid in order to practice.
13. Youth must wear their ID badge for each practice.
14. Follow current Extension operational COVID guidance and regulations of the Anderson County Sportsmans Club.

I understand it is my responsibility to review and explain these rules to my child. I certify by signing this form that we both understand and plan to abide by these rules. We understand that consequences may incur if these rules are broken. I do grant my permission for my child to participate in the Anderson-Woodford 4-H Shooting Sports Education Program.

Parent Signature

4-H Member Signature

Anderson-Woodford County 4-H Shooting Sports Club

Waiver of Liability

I _____, as legal guardian of _____,
Understand that my child has enrolled in the 4-H Shooting Sports Program. I understand that this program uses equipment such as shotguns, rifles, BB guns, pellet guns and archery gear. I understand that accidental injuries can occur in the use of this equipment.

I agree not to hold any of the following parties responsible in the event of accidental injury, death or illness:

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- ☀ University of Kentucky
 - ☀ University of Kentucky College of Agriculture Cooperative Extension Service or any of its employees
 - ☀ United States Department of Agriculture
 - ☀ Anderson or Woodford County Extension Council or any officer or member
 - ☀ Anderson or Woodford County 4-H Council or any officer or member
 - ☀ 4-H Volunteer Leaders for Youth Development
 - ☀ Anderson or Woodford 4-H Extension Youth Development Agents
 - ☀ Any Private Property Owner
 - ☀ Anderson County Sportsmen Club, Inc., Lawrenceburg, KY
 - ☀ Bluegrass Sportsman's League
 - ☀ KY Wildlife Management Center
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Guardian's Signature _____ Date _____

ANDERSON COUNTY SPORTSMAN'S CLUB
1070 Old Joe Road
Lawrenceburg, Kentucky 40342
(502) 517-6114

RELEASE AND WAIVER OF LIABILITY AGREEMENT

I, _____, (hereinafter Participant), acknowledge that I voluntarily have chosen to participate in shooting related activities at the ANDERSON COUNTY SPORTSMAN'S CLUB, 1070 Old Joe Road, Lawrenceburg, Anderson County, Kentucky. I am aware that shooting related activities include, but are not limited to: handling, using, shooting and/or discharging firearms, black powder arms, air guns and archery equipment, and items regulated by the National Firearms Act (commonly known as the NFA); handling loaded ammunition; being in areas designated for shooting activities that are intended for the discharge of firearms; being in the vicinity of persons engaged in shooting disciplines involving engagement of multiple targets while moving; and being around other individuals engaged in shooting related activities. Risks inherent in shooting related activities include, but are not limited to, death, bodily injury, property damage, exposure to potentially hazardous substances or compounds containing lead, mercury and other hazardous chemicals, loss of eyesight up to and including total permanent blindness, hearing loss, and/or other medical problems.

I AM AWARE THAT THESE ACTIVITIES ARE HAZARDOUS ACTIVITIES AND THAT I COULD BE SERIOUSLY INJURED OR EVEN KILLED. I AM VOLUNTARILY PARTICIPATING IN THESE ACTIVITIES WITH KNOWLEDGE OF THE DANGER INVOLVED, AND AGREE TO ASSUME ANY AND ALL RISKS OF BODILY INJURY, DEATH OR PROPERTY DAMAGE, WHETHER THOSE RISKS ARE KNOWN OR UNKNOWN. BY SIGNING THIS DOCUMENT, I AM WAIVING ANY AND ALL LIABILITY ACTIONS WHICH I MIGHT PURSUE AGAINST THE ANDERSON COUNTY SPORTSMAN'S CLUB, ITS MEMBERS, ITS OFFICERS, AND ANY OTHER INDIVIDUAL(S) WHO ARE ALSO ENGAGED IN SHOOTING RELATED ACTIVITIES CONDUCTED UPON THE PREMISES OF THE ANDERSON COUNTY SPORTSMAN'S CLUB, AT ANY TIME, NOW OR IN THE FUTURE, FOR ANY AND ALL BODILY INJURY OR INJURIES, DEATH OR DEATHS, OR PROPERTY DAMAGE, INCLUDING ANY AND ALL LIABILITY ACTIONS ARISING OUT OF NEGLIGENCE ON THE PART OF THE ANDERSON COUNTY SPORTSMAN'S CLUB, ITS AGENTS, OFFICERS, MEMBERS, AND/OR OTHER PERSONS ENAGED IN SHOOTING RELATED ACTIVITIES ON ANDERSON COUNTY SPORTSMAN'S CLUB PREMISES.

I verify this statement by placing my initials here: _____

Parent or Guardian's initials (if under 18): _____

As consideration for being permitted by ANDERSON COUNTY SPORTSMAN'S CLUB to participate in the aforementioned activities, I forever release ANDERSON COUNTY SPORTSMAN'S CLUB, and its respective directors, officers, employees, members, volunteers, agents, guests, contractors, and representatives (collectively "Releasees") from any and all actions, claims, or demands that I, my assignees, heirs, guardians, next of kin, spouse and legal representatives now have, or may have in the future, for any and all injury, death, or property damage, related to (i) my participation in these activities, (ii) the negligence or other acts, whether directly connected to these activities or not, and however caused, and/or (iii) the condition of the premises where these activities occur, whether or not I am then participating in the activities.

I also agree that I, my assignees, heirs, guardians, next of kin, spouse and legal representatives will not make a claim against, sue, or attach the property of any Releasee in connection with any of the matters covered by the foregoing release.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE ANDERSON COUNTY SPORTSMAN'S CLUB, AND I SIGN IT OF MY OWN FREE WILL. I also understand this release and waiver shall remain in effect indefinitely, unless and until it is specifically revoked by me, in writing; I further understand that any such revocation shall not apply to any claim that was brought, or which could have been brought, while this Release and Waiver of Liability Agreement was in effect.

PARTICIPANT

Signature: _____

Date: _____

IF YOU ARE UNDER 18 YEARS OF AGE, YOU AND YOUR PARENT OR GUARDIAN MUST SIGN AND INITIAL THIS FORM WHERE INDICATED. If Signed by Parent or Guardian: I verify that the dangers of the activities and the significance of this Release and Waiver were explained to the Participant and that the Participant understood them.

PARTICIPANT'S PARENT OR GUARDIAN (if Participant is under 18 only)

Signature: _____

Date: _____

Participant's Address: _____