

# Greater St. Louis Area Council

## Shooting Sports Participation and Hold-Harmless Agreement

The Greater St. Louis Area Council is conducting the Cowboy Action Shooting program as part of older Scout programming at its summer camps.

In the Cowboy Action Program, Scouts will shoot a rifle, pistol, and shotgun under the supervision of an NRA Range Safety Officer and NRA Certified Instructors. Scouts will be required to wear eye protection and hearing protection at all times while on the range. Scouts are expected to abide by all safety rules and instructions of the Range Safety Officer(s) and rifle, pistol, and shotgun instructor(s).

I, the undersigned, give my child \_\_\_\_\_ permission to participate in the Cowboy Action Shooting Program. I understand that participation in the activity involves a certain degree of risk. I have carefully considered the risk involved and have given consent for my child to participate in the activity. I understand that participation in the activity is entirely voluntary and requires participants to abide by the rules and standards of conduct. I release the Boy Scouts of America, the local council, the activity coordinators, and all employees, volunteers, related parties, or other organizations associated with the activity from any and all claims or liability arising out of this participation.

For safety, my child and I agree that they will do the following or they will be removed from the program. I understand that any additional cost associated with participation in this program will not be refunded if my child is removed due to behavioral problems.

1. Complete a range safety briefing.
2. Wear all safety gear at all times on the range.
3. Follow all safety rules.
4. Follow the instructions of the Range Safety Officer(s) and firearms instructor(s).
5. Do not handle any firearms until instructed to do so by the instructor(s).
6. Is 14 years of age, or 13 and has completed the 8<sup>th</sup> grade, as of the start of the activity and will be in full compliance with all local, state, and federal guidelines, including age restrictions and original equipment manufacturer instructions.

Participant Signature \_\_\_\_\_ Date \_\_\_\_\_

Unit Type & Number \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Printed Name \_\_\_\_\_

Primary Contact Number \_\_\_\_\_