



Release of Liability Form

I, _____, release the Owners of the Shooting Facility known as the “RKBA Gun Range”, the Property Owners and the volunteer workers from any liability during my use of the Shooting Facilities. I agree that I am using the facility at my own risk and I have received a copy of and will read and abide by the **SAFETY RULES**.

I further agree that I will have each member of my party who uses the facility sign a **Shooter’s Release of Liability Form**.

If I fail to get a signed **Shooter’s Release of Liability Form** from any member of my party who is injured, I agree to indemnify, hold harmless, and defend the Owners of the Facility, the Property Owners and the volunteer workers against any claims arising by reason of any actual or asserted injuries.

This agreement is binding any time that I enter and or use the Shooting Facility.

(User’s signature)

(Witness)

(Date)

(Date)

Membership Monthly:____ Yearly:____

FOID ID Number: _____

Phone Number: _____

Address: _____

Email: _____