

Texas Riviera Pistoleros
Gamble Gulch George West, Texas

PLEASE PRINT CLEARLY 2024 Release of Liability

I, _____, and on behalf of my children, my parents, heirs, assignees,
(print your full name here)

personal representatives and estate, in consideration of my participation in or observation of the Texas Riviera Pistoleros' monthly shooting events at the private property of John Lance Cunningham and Janet Marie Cunningham (Gamble Gulch), **hereby release and agree to hold harmless and indemnify** all officers of the Cowboy Action Shooting Club known as Texas Riviera Pistoleros, its employees and agents, all other participants, and any other people officially connected with any Texas Riviera Pistoleros' event, including land owners John Lance Cunningham and Janet Marie Cunningham, **from any and all liability for damage to or loss of personal property, sickness or injury from whatever source, legal entanglements, imprisonment, death, or loss of money, which might occur while participating with this Shooting Club.**

Specifically, I release said persons from any liability or responsibility for knowledge of my physical condition, for the condition of the shooting stages/courses, and for the presence or actions of any other participants. I hereby state that I am in sufficient physical condition to accept the required level of physical activity, and I am not legally disabled/barred from handling guns.

I understand this activity takes place on a **private shooting range**. I am aware that participation in or observation of the sport of Cowboy Action Shooting with **loaded firearms is a hazardous activity**. I understand that participation in this program is **strictly voluntary and I freely chose to participate in, or observe these activities, with the knowledge and appreciation of the danger involved.**

I agree to accept any and all risk of property damage, personal injury, or death.

I am knowledgeable in the safe operation of guns, specifically six-shooters, lever-action rifles, and shotguns. I have been informed of the safety requirements of the Texas Riviera Pistoleros Club, and I will follow all safety requirements in the handling of all weaponry.

- It is **my responsibility** to review and understand all safety rules and requirements of the Texas Riviera Pistoleros before shooting on this range.
- I understand that the Texas Riviera Pistoleros Club does not provide medical coverage for me.
- I verify that I will be responsible for any medical costs I may incur as a result of my participation.
- I give consent to whatever medical care might be provided on the premises.

I expressly agree, and promise to accept and assume all of the risks, emanating from any and all Texas Riviera Pistoleros activities. I know that I may be found by a court of law to have **waived my right to maintain a lawsuit against Texas Riviera Pistoleros on the basis of any claim, whether loss of property or personal injury or death.**

I also agree that Texas Riviera Pistoleros may use and license others to use my name, voice, likeness, and that of my equipment, and any information I provide, in any and all media.

NAME: _____ **ALIAS:** _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

PHONE: _____ **EMAIL ADDRESS:** _____

EMERGENCY CONTACT NAME: _____ **PHONE:** _____

EMERGENCY MEDICAL INFO (OPTIONAL): _____

Participant's Signature

Date

Phone Number

Must also have Parent/Guardian's signature if Participant is under 18

Please circle one of the following:

I am a **shooting non-member**

non shooting visitor