LIVE FIRE WAIVER

Assumption of Risk & Release of Liability

TRAIN WITH PURPOSE. | ADULT PARTICIPANTS 18+

PARTICIPANT FULL NAME

TRAINING DATE

COURSE / SESSION

RANGE / LOCATION

Impact Shooting Center

1 | ACKNOWLEDGMENT OF RISK

I voluntarily participate in the session identified above, including firearm handling, instruction and live fire. Risks include gunshot wounds, accidental discharge, ricochets, equipment failure, hot brass, noise, lead exposure, falls, weather and the acts of others. These risks may cause property damage, permanent disability or death. I understand that safety measures cannot eliminate every risk, and I knowingly accept the risks of participation.

2 | SAFETY & FITNESS TO PARTICIPATE

I will follow all instructor and range commands, keep firearms pointed in a safe direction, keep my finger off the trigger until ready to fire, and wear required eye and hearing protection. I will immediately obey any cease-fire command and report unsafe conditions. I am legally permitted to handle the firearms used and am not impaired by alcohol, drugs or medication. I will disclose any limitation affecting safe participation and stop if I cannot participate safely. 3B may stop my participation for unsafe conduct.

3 | RELEASE OF LIABILITY — READ CAREFULLY

To the fullest extent permitted by law, I release 3B Training Group, its owner, instructors, employees and agents from claims for personal injury, death or property damage arising from my participation in this session, **including claims caused by their ordinary negligence.** This release does not cover gross negligence, reckless, willful, wanton or intentional misconduct, or any liability that cannot lawfully be waived. If a provision is unenforceable, the remaining provisions remain effective to the extent permitted by law.

4 | EMERGENCY CARE & BRIEF DISCLAIMER

I authorize 3B to request emergency medical assistance if needed. Training does not guarantee safety, proficiency, certification or a particular outcome. This form does not replace any separate range waiver or range rules.

I am at least 18 years old. I have read and understand this entire waiver, had an opportunity to ask questions, and sign voluntarily knowing that I am giving up legal rights.

EMERGENCY CONTACT NAME / RELATIONSHIP

EMERGENCY CONTACT PHONE

PARTICIPANT SIGNATURE

DATE SIGNED