

**PERMISSION STATEMENT FOR MINOR (UNDER 18) TO PARTICIPATE IN LAFAYETTE GUN CLUB  
JUNIOR PROGRAM HOSTED SCOUT/CIVIC EVENTS**

I, \_\_\_\_\_, parent/legal guardian give permission for \_\_\_\_\_, my child/ward to participate in Lafayette Gun Club (LGC) hosted activities involving the firing of firearms in accordance with LGC Range Rules and policies. I understand that my child/ward is required to follow all safety rules and commands while on LGC property and may be required to leave LGC property for any violations. I consent to video recording of this participation.

I understand and acknowledge that participation in these activities bears certain known risks which, while rare, could result in personal injury, illness, or death. I agree, covenant, and promise to accept and assume all responsibility and risks and agree to pay for any and all damages caused to others due to my child/ward's negligent actions. I further understand that I agree to hold LGC harmless from any and all claims that may be made by others due to my child/ward's action. I further agree to pay any and all expenses and judgments including attorney fees and expert fees if they are incurred by LGC in defense of any and all claims associated with my child/ward's actions. My child/ward's participation in this activity is completely voluntary, and I elect to allow my child/ward to participate recognizing known and any unknown risks.

\_\_\_\_\_ Date: \_\_\_\_\_

Parent/Legal Guardian Signature

\_\_\_\_\_  
Print Name

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The following is optional but participant will not receive the NRA certificate without below:

By filling in the below information, I further agree to releasing this information to the National Rifle Association in order for my child/ward to receive credit from the NRA for completing the NRA Program associated with my child/ward's activities and to receive a certificate of completion. Enter Information as you want it to appear on the certificate

Name (First and Last) \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Email (can be parents) \_\_\_\_\_ Phone (can be parents) \_\_\_\_\_

NRA Membership Number (if applicable) \_\_\_\_\_