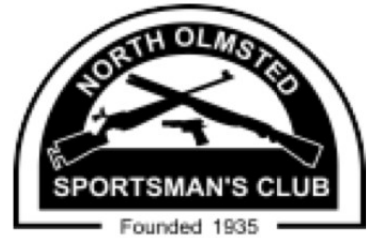


NOSC JR. Rifle PROGRAM
PARENT CONSENT
JUNIOR CONTACT INFORMATION



Name: _____

Email: _____

Home Address: _____

City: _____ State: _____ Zip: _____

PARENT/ GUARDIAN INFORMATION (*Emergency contact person*)

Name: _____

Relationship: _____

Email: _____

Address: (If different than above)

Telephone Number(s):

In consideration for the admission of this junior to participate in any activity of the North Olmsted Sportsman's Club Jr. Rifle Program (NOSC) during calendar year, I hereby:

1. Give my permission for this Junior's participation; and
2. Release the NOSC and any other organization sponsoring or supporting such activity (including all directors, officers, employees, agents and volunteer workers) from any claim or liability that may arise directly or indirectly from this Junior's presence or participation in the activity; and
3. Agree to defend, indemnify and hold harmless the parties referred to in Paragraph 2 above from any claim arising from any wrongful or negligent conduct by this Junior.
4. Agree that photographs of the participant taken during NOSC and the participant's competition results may be published or reproduced by the NOSC in its printed or electronic communications.

Junior's Signature:

Date:

Parent's Signature:

Date:
