



Thank you for your interest in training with DP Firearms. Each participant must fill out and submit this waiver form prior to the scheduled training date. Please let us know if you have any questions or special needs so we can prepare prior to your arrival.

WHEREAS, in return for instruction in firearms, use of premises, and for other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the Undersigned agree to the following:

The Undersigned agrees to indemnify, hold harmless and defend David Thomas, DP Firearms LLC, and any of its employees, directors, officers or agents {hereinafter the "DT"}, from any and all fault, liabilities, costs, expenses, claims, demands or lawsuits arising out of , related to or connected with: the discharge of firearms; the course of instruction; the Undersigned's participation in the course of instruction; the range, buildings, land and premises used for the course of instruction {hereinafter}the "Premises"; the Undersigned's presence on or use of said Premises; and any and all acts or omissions of the Undersigned. And should any such claim, demand or lawsuit arise or be asserted in any what whatsoever related thereto, whether rising under the laws of the United States or of any State, or under any theory of law equity, the Undersigned will indemnify, hold harmless and defend DT, from any and all costs, expenses or liability including, but not limited to, the cost of any settlement or judgment made or rendered against DT, whether individually, jointly or in solido with the Undersigned, together with all costs of court and other costs or expenses incurred in connection with any such claim, demand or lawsuit, including attorney's fees.

_____ **I Agree**

1. Participant is at least 18 he of age, mentally competent and medically able that I am legally permitted to possess and use firearms. To the extent Participant is a minor, the parent or guardian listed below gives permission to participate in a event under the conditions stated within and signs on behalf of Participant. The individual signing below gives this General Release freely and knowingly with full understanding of its content and effect.

_____ **I Agree**

2. DT will allow Participant entry into the course after Participant signs the waiver. Participant acknowledges that the Course, though beneficial is not a necessity and that similar courses are offered by other entities. Participant is under no physical or economic compulsion from DT to engage in this particular Course or to sign this Waiver.

_____ **I Agree**

3. Participant will follow all directions given by DT agent {the "Instructor"} for the duration of the Course. Participant acknowledges that such directions are vital for the safety of all Course participants. Failure to follow directions from the Instructor may result in Participant's ejection from the Course without refund of any monies paid to DT for participant's attendance.

_____ **I Agree**

4. Participant expressly acknowledges that training with live ammunition is inherently dangerous and that there is no possible way that DT, its employees, or its agents can provide a totally safe environment for the Course. Participant acknowledged that attending and participating in the Course will enhance Participant's exposure to risk of injury occasioned by carelessness of the Instructor and other Course participants. The Participant risks serious bodily injury and harm that includes a risk of death or dismemberment. Participant hereby assumes the risk of any and all injury that may result in participation in the Course.

_____ **I Agree**

5. Participant hereby absolves DT of any its employees, and its agents harmless from any sort of injury or damage experienced by Participant in taking the Course. Participant expressly waives any and all rights and causes of action participant may have for compensation at law and equity, including negligence, from DT. It's employees, or its agents in such event that the Participant is injured and shall indemnify the same.

_____ **I Agree**

6. I do not have any physical injuries or restrictions that would limit or prevent me from participating in this training and I will inform the instructors upon arrival to the facility or training venue of any change or injury regardless of nature to occurrence.

_____ **I Agree**

7. Participant understands that any photographic, video, or other electronic imagery produced as a result of this class is for the sole purpose of DT in their advertising uses. I hereby give permission to DT to use my image{s} for the above mentioned purposes.

_____ **I Agree**

8. Participant certifies that they are not a fugitive from justice, or under indictment. Participant is legally permitted to possess and use firearms and other related equipment {Firearms}, whether as part of a DT event r otherwise, and is capable of using Firearms safely. participant is responsible for determining the requirements of all applicable laws as they may relate to ownership, possession and use of firearms, and remaining in compliance with such requirements. Participant will follow the policies, procedures and rules of the venue and DT range rules, including the policies and rules of the venue where DT event takes place. DT reserves the right to revoke Participant's right to participate in a DT event at any time for any reason.

_____ **I Agree**

9. participant certifies they have not been convicted, true found, or arrested for a felony offense. I am not currently on formal, informal, or summary probation/parole for any reason. I am not currently under the influence of an over-the-counter or prescription drug that would impair my judgment or physical ability to safely operate a firearm {real or simulated}. Finally, I am not currently under adjudication or under any Court's jurisdiction for mental incompetence.

_____ **I Agree**

10. Participant understands the hazards of coronavirus and similar infectious diseases, and accepts full responsibility for self-compliance with the most recent CDC guidelines. Notwithstanding the risks associated with infectious disease, which are readily acknowledged, Participant hereby willingly chooses to participate in DT's activities, acknowledging and fully assuming the risk of illness or death arising from participating in the activities, arising from or out of, or related to, directly or indirectly, the infection of coronavirus or any other illness or injury.

This General Release will continue in effect after termination of Participant's participation in a DT/DT Firearms LLC event. An electronic or facsimile signature will have the same force and effect as an original, non-facsimile signature. This instrument binds the Undersigned and his/her executors, administrators, assignees or heirs. By signing below, Participant acknowledges and agrees to the above terms and conditions.

_____ **Initial**

PLEASE SELECT WHO WILL BE PARTICIPATING...

ADULT

MINOR

Print Name

Date

Signature

Age

Parent/Guardian Print Name

Date

Parent/Guardian Signature

Please submit this for to info@dpfirearms.com prior to the scheduled training.

DP Firearms LLC