

Orange County Indoor Range and ProShop

684 N. Berry St., Suite C Brea, CA. 92821

(714) 529-0300

Minor's Waiver

I am signing this agreement as a parent or guardian of a child under the age of 18 so the child may be able to enter the RANGE or make use thereof, I ALSO AGREE TO INDEMNIFY AND HOLD HARMLESS ORANGE COUNTY INDOOR SHOOTING RANGE AND IT'S PARENT COMPANY, AGENTS AND EMPLOYEES FROM ANY AND ALL LIABILITIES, CLAIMS, DEMANDS OR CAUSES OF ACTION BROUGHT BY OR ON BEHALF OF THE CHILD FOR INJURIES AND DAMAGES ARISING OUT OF MY USE OF THE RANGE, OR THE CHILD'S PRESENCE AT THE RANGE, THAT IS ALLEGED TO HAVE BEEN CAUSED BY THE NEGLIGENCE OF ORANGE COUNTY INDOOR SHOOTING RANGE AND/OR ITS EMPLOYEES, AGENTS OR ASSIGNS, OR CAUSED BY ACTS OR OMISSIONS OF THIRD PARTIES OR CAUSED BY HIDDEN, LATENT, OR OBVIOUS DEFECTS IN THE RANGE FACILITIES INCLUDING BUT NOT LIMITED TO THE BULLET TRAP AND ITS ASSOCIATED AND COMPONENT PARTS OF THE RANGE. Further, on behalf of the minor identified below, as to whom I am the legal parent or guardian, generally and specifically, I hereby and forever, generally and specifically release and discharge the RANGE, its employees and agents and assigns from any and all liabilities, claims demands or causes of action that the minor may have against the RANGE for any and all injuries and/or damages arising out of the minor's use of the RANGE or his/her presence at the range, including but not limited to, injuries or damages caused by (1) the negligence of the range, whether active or passive, and/or its employees, agents or assigns, or (2) ricochets of bullets or bullet fragments, or (3) the acts or omissions of third parties, or (4) hidden latent or obvious defects in the range facilities including but not limited to, the bullet traps and the associated component parts of the range.

Print Minor's Name : _____ Age : _____

Print Parent/Guardian's Name : _____

Print Parent/Guardian's Address : _____

City : _____ State : _____ Zip : _____

Parent/Guardian's Signature : _____ Date : _____

Range Officer Signature : _____ Date : _____