## INDIANA GUN CLUB 2025 WAIVER, RELEASE OF LIABILITY, AND INDEMNIFICATION AGREEMENT

I, the undersigned, wish to participate in the <u>IREM Indianapolis 2025 Sporting Clay Shoot</u> ("Event) and in consideration of the privilege to 4participate in the Event, I acknowledge, agree, and understand as follows:

1. Risk Factors. I understand and acknowledge that participation in the sport of sporting clays" involves the firing of shotguns in close proximity to one another by me and other individuals with varying levels of skill and experience. I further understand and acknowledge that the very nature of shotgun shooting sports is hazardous and risky, and that I must rely on the safety measures exercised by other shooters who may be inexperienced. I further understand that there are no dividing barriers between the multiple firing ranges which make up a sporting clays course and that I am at risk while I participate in this Event.

2. Voluntary Assumption of Risks. I voluntarily and of my own free will, elect to participate as a member of a squad in the

IREM Indianapolis 2025 Sporting Clay Shoot held at The Indiana Gun Club ("IGC"). I assume all risks that arise out of participation in the Event, including, but not limited to, those risk factors described in Section 1 above, the use of the equipment or facilities, the acts of others, or the unavailability of emergency care. I assume all of these risks in any capacity that I may be involved with at the Event, including, but not limited to, all practicing or playing as a member of a squad in the Event, while serving in a non playing capacity as a member of a squad in the Event and while upon the premises of IGC.

<u>3.Physical Health and Age.</u> I hereby certify that I am healthy and have no physical disabilities or infirmities that would restrict full participation in the Event. I further certify that I am eighteen (18) years or older.

4. Release. I release the Indiana Gun Club, The Phillip Baker Group LLC. and their directors, officers, employees, agents, representatives, volunteers, event professionals, successors, and assigns from any and all liability of any kind or nature, including, but not limited to, property damage, bodily injury or death from the risks described in Section 1 above and from any and all claims, including suits, procedures, costs, expenses (including attorneys fees and expenses), damages and liabilities arising out of, connected with, or resulting from my participation in the Event.

<u>5.Waiver.</u> I waive any protection afforded by any statute or law in any jurisdiction whose purpose, substance, and/or effect is to provide that a general release (such as the release now before me) shall not extend to claims, material or otherwise, which the person giving the release does not know of or suspect at the time of executing the release. This means, in part, that I am releasing unknown future claims.

**6.Indemnify and Defend.** I agree to indemnify and defend the Indiana Gun Club, Phillip Baker Group LLC. and their directors, officers, employees, agents, representatives, volunteers, event professionals successors, and assigns (collectively referred to as "Indemnitee") and hold them harmless from any or all claims, causes of action, damage judgments, costs or expenses, including attorney fees and expenses, which in any way arise from my involvement in the Event or this agreement which, include, but are not limited to, damage to or destruction of any property of the Indemnitee, of any others, my injury, my death, or the injury or death of anyone else, or any liability arising from the act of the Indemnitee, whether negligent or willful, my act, whether negligent or willful, or the act of anyone else, whether negligent or willful.

**7. Representatives.** I enter this agreement for myself, my estate, my heirs, my representatives and assigns, and I understand that this release shall be binding upon me, my estate, my heirs, my representatives and assigns.

**8.**Emergency treatment Consent. I hereby consent to medical treatment in a medical emergency where I am unable to consent to such treatment.

**9.** Acknowledgement. I have read and understand this agreement and realize that it relates to surrendering valuable legal rights and I do so freely and voluntarily. I also acknowledge that I have read, understand, and agree to abide by IGC's Rules, Policies, and Operating Guidelines, and further acknowledge the right of IGC's officers or range of officers to immediately terminate my participation in the Event upon my failure to fully comply with any such Rules, Policies, or Operating Guidelines.

Signature	
Printed Name	EMERGENCY CONTACT INFORMATION
Email	Name
Phone #	Phone #

Please email completed waiver to office@iremindy.org