

# Waiver and Release of Liability, and Indemnification Agreement by Participant

On March 31<sup>st</sup> 2022, Pac-Mac Holdings, Inc. ("ProSource"), will hold a Clay Shooting Event, the ProSource Charity Shoot Out (hereinafter "Event"), which will be hosted by and held at Defender Outdoors Clay Sports Ranch.

In consideration for my being permitted to participate, attend, assist, or in any way be a part of or be involved with this Event, I hereby acknowledge, agree, and represent:

1. That shooting sports have inherent risks, hazards and dangers for anyone who may participate, attend, assist, or in any way be a part of or involved with such activity, which cannot be eliminated; and that such risks, hazards and dangers include without limitation:
  - a) The risk of handling firearms and being near others that have firearms in their possession;
  - b) The risk of personal injury including but not limited to loss of hearing, loss of sight, paralysis or death, is ever present at such event;
  - c) The risk of personal injury of any kind may be a result of ammunition and shots from any firearm whether mine or another's; and
  - d) The risk of further injury during rescue operations.
2. I have been advised that other persons will be shooting and carrying firearms at this facility and Event and I agree to act prudently and carefully to avoid being harmed or causing harm or injury to any other person while at this facility and Event.
3. I certify that I am an adult of the age of 18 years or older and familiar with the use and operation of the firearm used at this Event and familiar with the rules of shooting and firearm safety.
4. That this Event is extremely dangerous and requires a certain degree of skill and knowledge of firearms and may require good physical conditioning.

I further acknowledge, agree and represent that there are inherent risks associated with participating in this Event, including, but not limited to, those caused by the negligence of others, terrain, facilities, temperature, weather, equipment, and actions of other people. I knowingly, agree and expressly assume all of the risks associated therewith, whether known or unknown to me at this time. I acknowledge and certify that I am fit to participate in this Event and have not been advised otherwise by a qualified medical person.

I further acknowledge, agree and certify to release, waive, discharge, and covenant not to sue ProSource, and/or any of their directors, officers, members, managers, corporate affiliates, vendors, sponsors, volunteers, employees, agents or representatives of any kind (collectively "Releasees") from responsibility for my accidental physical injury, including death or illness, loss or damage to personal property, or any claim arising from or relating to, my participation at this Event. I further agree to indemnify, save and hold harmless the Releasees from any and all claims, demands, losses, damages and liabilities for indemnities, contribution or otherwise with respect to any damage and/or injury, of any type, arising from my participation in the activities. This release is also intended to include all claims made by my family, estate, heirs, personal representative or assigns. I further agree to defend, hold harmless and indemnify Releasees from and against any claim brought against them arising out of my negligence or willful misconduct.

I also grant permission to ProSource the right to use, reproduce, and/or distribute photographs, films, video-tapes, and sound recordings, without compensation or approval rights, for use in materials created for purposes of promoting the activities of ProSource.

I have read this Waiver, Release and Indemnification Agreement, have asked and received answers to any questions I had concerning its meaning and have executed it freely, without duress, and in full complete understanding of its legal effect and consequences, and of the fact that it may affect my legal rights.

**THIS IS A COMPLETE, FULL AND GENERAL RELEASE BETWEEN THE PARTIES!**

\_\_\_\_\_  
Signature of Adult Participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Adult Participant