



# Woburn Sportsmen's Association, Inc.

155 Middlesex Turnpike, Post Office Box 266  
BEDFORD, MASSACHUSETTS 01730

## W.S.A. Firearms Safety Course Student Statement and Liability Release Agreement

**(Please read carefully before signing)**

I hereby release the Woburn Sportsmen's Association, Inc., its officers, directors, members, instructors, and their agents and employees, and those other organizations affiliated with this course from any liability, loss, damage, costs, claims and/or causes of action, including but not limited to all bodily and personal injuries and death and property damage, arising out of my participation in the firearms training course taught at the Woburn Sportsmen's Association, Inc., it being specifically understood that said course includes the operation and use of firearms and ammunition by the myself and others. This release is given on behalf of myself, my heirs, successors, executors, administrators and assigns.

I understand that there are inherent and other risks involved in the use of guns and ammunition in shooting, and I freely and voluntarily assume and accept those risks.

I agree to abide by all safety rules required by the Woburn Sportsmen's Association. I understand that my instruction may be terminated at any time, and my fee forfeited, if my cooperation is deemed to be unsatisfactory by the instructors or my behavior or actions are deemed to be a risk to others or myself.

I understand that the safe and proper use of firearms requires a positive attitude based on maturity, responsibility, ethics and respect. I understand that my instruction may be terminated at any time, and my fee forfeited, if in the opinion of the instructors, I fail to demonstrate the proper attitude and knowledge necessary for the safe and proper use of firearms.

I understand that this course presents general information regarding firearm safety, self-defense and the law and that it is not intended to be comprehensive in any way nor is it intended as legal advice. I understand that the laws governing firearm ownership, possession and self-defense are subject to frequent changes through legislation and court interpretation and that nothing in this course shall be taken as a definitive guide to the laws in my jurisdiction. For any legal questions, interpretations or advice, I will consult with a knowledgeable attorney.

I certify that I am at least 21 years of age; I have never been convicted of, or under indictment for a felony; I am not the subject of a restraining order; and I have never been institutionalized for any mental disorder.

The applicable laws of the Commonwealth of Massachusetts govern this agreement. If any part of this agreement is determined to be unenforceable, all other parts shall be given full force and effect.

**I, the undersigned, have read and understand this Firearms Safety Course Student Statement and Liability Release Agreement.**

\_\_\_\_\_  
Last Name (Printed)

\_\_\_\_\_  
First Name (Printed)

\_\_\_\_\_  
MI

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Signature

\_\_\_\_\_  
Date