

NRA EDDIE EAGLE CHILD GUN SAFETY CLASS

Please fill out application form and mail it, to the following address;

Mail to; **SSD Tactical Training P.O. Box 443 Ludlow, MA 01056.**

Any questions contact us at **413-204-0592** or Email: dw14mpoc@verizon.net

Date of course: _____

Your Child's name: (Print clearly), _____

Date of Birth month/ day/ year _____/_____/_____

Guardian/ Parents name: _____

Your Address: Street & # _____

City, Town, Village _____ State _____ Zip _____

Phone # () _____ E-Mail _____

NRA member # _____ (If a member)

Fee: FREE.

Release from liability and assumption of risk:

(1) Intending that this agreement is legally binding upon my heirs, executors, administrators, successors and assigns, I hereby waive/ release any photos taken/ posted on website and forever discharge SSD Tactical Training, and all of its agents, representatives, executors, administrators and assigns, any and all claims, demands, rights and cause of actions of whatsoever any kind and nature arising by reason of and any and all known and unknown, seen and unforeseen, physical and mental and consequences thereof, suffered by me during training activities held at:

Location: Ludlow, MA.

Program: NRA EDDIE EAGLE

(2) Note here any conditions or disabilities that may require special attention

(3) I have been given reasonable opportunity to ask questions on the topics discussed in the course and it was highly recommended to me that I further study and / or practice on the Firearms education provided be undertaken. I understand that I may be held personally liable for my actions and that ignorance of the law is never an excuse. I further agree to hold harmless and indemnify SSD Tactical training, and all his/her affiliates and associates.

(4) I further understand and agree that if SSD Tactical training or any of its Instructors believes that I pose any risk to themselves, members of the immediate class or general public by my actions or attitude, I will be immediately dismissed from the training without any recourse or refund.

Signature _____ Date: _____