



In order for a student to participate in the SBFFA Shooting Sports Program, student and parent/guardian must **review** and **initial** this document, have it **notarized** and **returned** by the due date of ____/____/____.

Student participant and parent agree to these points:

STUDENT INITIALS PARENT INITIALS

- ____ ____ Participant must be a current, dues paying FFA member.
- ____ ____ Participant will provide at their own expense a firearm, ammunition, protective hearing device and shooting glasses.
- ____ ____ Participant will provide at their own expense any shooting range fees for practices.
- ____ ____ Participant will adhere to all shooting range rules including but not limited to firearm safety, the wearing of hearing and eye protective equipment.
- ____ ____ Participant is responsible for own transportation to and from all practices and events accompanied by a parent or designated guardian.
- ____ ____ Participant will make 80 percent of scheduled practices to be considered for competition. Failure to attend will result in the loss of shooting privileges.
- ____ ____ Participant must have current up to date Texas Hunter Education Safety certification in order to participate (practice and shoot competitively) with the SBFFA Clay Crushers.
- ____ ____ Participant must have passed the Wildlife, Fisheries, and Ecology course **OR** the iCEV Ducks Unlimited Certification course **and** earned their Texas Hunter Education Safety certification to be eligible to participate in the 381 State Ag Clay Shooting events.
- ____ ____ Participant must not have any penal code or game/fish law violations.
- ____ ____ Participant must meet UIL passing guidelines to be eligible for competitions.
- ____ ____ Participant must follow all rules from the Code of Conduct and Student Handbook at practices and competitions.
- ____ ____ Parent will provide a student medical release that will be kept on file and carried to every team practice and event in case medical attention is required and parent contact is unable to be made.
- ____ ____ Participants asked to leave a practice due to conduct or safety reasons will not be permitted to return to the team until the parent/guardian meets with the ASTs and the team coach. Students dismissed from practice for cause may not leave with their firearm unless the coach can personally turn it over to the parent/guardian.
- ____ ____ Participants dismissed from the team for any reason are prohibited from participating the current and following school year.
- ____ ____ All school district properties are gun-free zones. Under no circumstances are firearms or ammunition allowed on the property, including vehicles in parking lots. Violations will result in immediate dismissal from the team, law enforcement prosecution, and school discipline consequences to the maximum extent possible.

I (participant) _____ and (parent/guardian) _____ acknowledge that I am aware of the rules, regulations, requirements and expectations of behavior of participants in the FFA Shooting Sports Program practices and events, and agree to abide by them as detailed above. I also agree to hold harmless Spring Branch ISD, the FFA chapter, coaches and sponsors should a shooting accident occur during a practice or competition.

Parent/Guardian Printed Name Relationship Signature Date

Participant Printed Name Signature Date

Sworn to and subscribed before me this _____ day of _____, 20____

Notary Public _____

Notary Stamp

Date of Expiration _____