



____, fully understand that my participation in the

Waiver, Release and Indemnity Agreement

Carrying Concealed Weapons (CCW) Safety Course Release and Hold Harmless Agreement for The County of San Bernardino

me to the risk of injury, death or prope	ourse (hereafter referred to as "Event") exposes erty damage. I hereby acknowledge that I am expressly agree to assume any such risks.
forever discharge the County of San Bounteers for any injury, death, or damage of or in connection with my participation	participate in this event, I hereby release and ernardino, it's officers, employees, agents and ge to me or loss of personal property arising out in this event from whatever cause, including the nty of San Bernardino, it's officers, employees, cipants in this event.
myself, my department, my heirs, adm indemnify and hold harmless the Coun	d to participate in this event, I hereby agree, for inistrators, executors and assigns, that I shall ty of San Bernardino, it's officers, employees, claims, demands, actions for suits arising out of this event brought by any third party.
I have also read and understand the County of San Bernardino Sheriff's Regional Training Center's Firearms Range Rules and Regulations.	
I have carefully read this release and hold harmless agreement and fully understand its contents. I am aware it is a full release of liability and sign it of my own free will.	
Date:	Signature
	Witness/Instructor Rev 030223