

Iowa Trophy Outfitters

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Your safety is our primary concern. We expect you to follow safe gun handling and hunting procedures. In the interest of everyone's safety, *no alcohol or drug consumptions are allowed while hunting or shooting*. Hunting can be physically demanding. We expect you to know your physical limitations.

Release and waiver Of Liability

By my signature affixed below I certify I am fully aware of the hazards involved in the sport of hunting and understand the necessary actions to assure hunter safety. I am also aware of the hazards associated with a farm and or ranching operations. In consideration of being permitted to participate in the sport of hunting conducted by **Iowa Trophy Outfitters**, I am willing to assume these hazards and do recognize they can be dangerous to both life and limb.

In full recognition of such, I hereby release, waive and discharge **Iowa Trophy Outfitters**, its owners, employees, or people with whom they may contract for services, including all landowners, from all liability to the undersigned, my spouse, legal representatives, heirs and assigns, for any and all loss, claim or damages resulting there from, on account of injury to me or my property, even injury resulting in death, while participating in the sport of hunting and shooting. This release and waiver is complete as it is my intent to hold harmless and indemnify releases for any injury that might result while I am involved in the sport of hunting conducted by **Iowa Trophy Outfitters** or while on its premises.

The undersigned assumes full responsibility for the risk of bodily injury, death or property damage due to the actions or inactions of releases. The undersigned agrees this release, waiver and indemnification agreement is intended to be as broad and inclusive as permitted by the laws of the state of Iowa.

You're Name in Print

Drivers License Number

State Issued

Signature

Date Signed

Social Security Number

Address

City

State

Zip code

County

Sign and Notarize

State of _____; County of _____

IN WITNESS WHEREOF, I have hereunto subscribed my name

And affixed my official seal this _____ day of _____, 20__.

My Commission Expires:

Notary Public