ALASKA DEPARTMENT OF FISH AND GAME

JHESC League

PARENTAL CONSENT

Student's Name _____
Last, First, Middle initial

Date of Birth _____/_____/_____ [ ] [ ] (check one)
mo/day/year **M** **F**

Residence Address _____
City State Zip

Mailing address _____
City State Zip

A. By my signature below, I authorize the above named student/minor to enroll in the ADF&G League program. I understand that he/she will be supervised by an ADF&G employee or certified Range Safety Officer (RSO).

B. I acknowledge that the minor is authorized to handle firearms and ammunition, and participating in a target sport shooting program. I recognize that the activity carries inherent dangers and don't hold the ADF&G or its staff liable for injury. I also understand that this consent is a requirement for anyone under the age of 18 years.

C. **Does the student named above have any physical or learning disabilities or requires medication that the supervisor should be aware of?** [ ] **YES** [ ] **NO**

If answered **yes**, please describe _____
_____
_____
_____

_____ _____/_____/_____
Signature of PARENT or GUARDIAN day/mo/year

Phone# (_____)_____

PLEASE RETURN TO JHESC Manager