CONSENT AND RELEASE

STATE OF		
COUNTY OF		
I,	, do hereby conser	nt to voluntarily participate in or allow my child,
	, to participate in t	the following WLA activities/property use as indicated
I do hereby ag	gree to release and forever discharge Wildlife	Action, Inc., it's officers, agents and employees from
all and any suits, claims, damage	s, liabilities, costs and expenses. During parti	cipation in said activities, property use, I hereby grant
WLA, it's employees and agents	full authority to take whatever actions they m	nay consider to be warranted under the circumstances
regarding the protection of the pa	articipant's health and safety, and I hereby rele	ease each of them from any liability for any such
decisions or actions as may be ta	ken by them in connections therewith. The au	thority granted in the preceding sentence shall include
the right to place the participant,	at his/her own expense, and without any furth	ner consent, in a hospital or medical services and
treatment.		
I have read and understand all ru	les and regulations and hereby agree to compl	ly with all rules, standards, and instructions relating to
this activity/property use which a	are promulgated by Wildlife Action, Inc. I agr	ee that Wildlife Action Inc., it's employees and agents,
shall have the right to enforce ap	propriate standards of conduct, that Wildlife A	Action, Inc., may at any time, terminate participation
in said activity/property use in th	e event of any failure to abide by such rules a	and regulations.
Signature Participant, Parent, Guardian:		Date:
Signature Furtherpaint, Furent, Gu		
MEMBERSHIP FORM		North Carolina Wildlife Action State Headquarters
New Member	Renewal	P.O. Box 1314
\$30.00 Individual	\$40.00 Family	Whiteville, NC 28472 910-642-8309
Name:		www.NC-WildlifeAction.org & we're on Facebook at "North Carolina Wildlife Action"
Address:		
City:	State: Zip:	
Phone: ()	Cell: () Email: _	