

## CONSENT AND RELEASE

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

I, \_\_\_\_\_, do hereby consent to voluntarily participate in or allow my child, \_\_\_\_\_, to participate in the following WLA activities/property use as indicated \_\_\_\_\_.

I do hereby agree to release and forever discharge Wildlife Action, Inc., it's officers, agents and employees from all and any suits, claims, damages, liabilities, costs and expenses. During participation in said activities, property use, I hereby grant WLA, it's employees and agents full authority to take whatever actions they may consider to be warranted under the circumstances regarding the protection of the participant's health and safety, and I hereby release each of them from any liability for any such decisions or actions as may be taken by them in connections therewith. The authority granted in the preceding sentence shall include the right to place the participant, at his/her own expense, and without any further consent, in a hospital or medical services and treatment.

I have read and understand all rules and regulations and hereby agree to comply with all rules, standards, and instructions relating to this activity/property use which are promulgated by Wildlife Action, Inc. I agree that Wildlife Action Inc., it's employees and agents, shall have the right to enforce appropriate standards of conduct, that Wildlife Action, Inc., may at any time, terminate participation in said activity/property use in the event of any failure to abide by such rules and regulations.

Signature Participant, Parent, Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

## MEMBERSHIP FORM

\_\_\_\_ New Member                      \_\_\_\_ Renewal  
\_\_\_\_ \$30.00 Individual                \_\_\_\_ \$40.00 Family

**North Carolina Wildlife Action**  
State Headquarters  
P.O. Box 1314  
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: \_\_\_\_\_