



Parent/Guardian Consent Form for Youth (under age 18) to Possess and Use Handguns and Handgun Ammunition at the Bluegrass Sportsmen's League

Minor must be in possession of this form unless accompanied by custodial parent or legal guardian. Valid for one year from date signed.

In recognition of the provisions of the Youth Handgun Safety Act as set forth in the Gun Control Act of 1968, 18 U.S.C. Chapter 44, I declare the following:

- (1) That I am the custodial parent or legal guardian of a juvenile named _____ whose date of birth is _____;
- (2) That I, myself, am not prohibited by Federal, State, or local law from possessing a firearm;
- (3) That the above-referenced juvenile has my permission to possess and use a handgun as well as handgun ammunition at the shooting ranges, or at scheduled shooting events while on BGSL property in which youth may participate at the Bluegrass Sportsman's League in Wilmore, Kentucky.

I understand that shooting on the ranges, designated hunting areas or at events held at the Bluegrass Sportsman's League may involve firing a handgun. I understand that said minor must be accompanied by a regular member in good standing at all times or by an event official, while on Bluegrass Sportsmen's League, Inc. property, and that said supervisor shall have the authority to cause said minor to obey the Constitution, By-Laws, Rules and Regulations, and Safety Regulations now in effect, or that may be hereinafter enacted. I further understand it is not the Bluegrass Sportsmen's League, Inc.'s responsibility to provide a member to accompany said minor.

I agree to hold the Bluegrass Sportsmen's League, Inc. harmless in the event of an accident and/or injury involving and/or to said minor.

The undersigned parent or guardian has the right to revoke this consent in writing by providing a signed, written revocation to the Range Master at Bluegrass Sportsmen's League, 2500 Handy's Bend Rd, Wilmore, KY 40390.

Signature of parent or legal guardian (*circle one*)

Date signed

(Note: signature must either be notarized or witnessed below)

COMMONWEALTH OF KENTUCKY

COUNTY OF _____

The foregoing was acknowledged,
subscribed, and sworn before me by
_____ on the
_____ day of _____, 20__.

My commission expires: _____

Signature of witness

Printed name of witness

Street address

City, State, ZIP

Phone number

Date witnessed

NOTARY PUBLIC, STATE AT LARGE
**Adult Witness To Parent or Legal Guardian's
Signature** (fill in below if not notarized):