

Chuluota Sportsmen's Club  
Minor Parental Consent

I \_\_\_\_\_, PARENT and/or LEGAL GUARDIAN of \_\_\_\_\_,  
(PRINT name of parent or legal guardian) (PRINT name of minor)  
do hereby give my permission for my minor child to be on the property of Chuluota Sportsmen's Club at 1447  
Willingham Rd, Chuluota, FL 32766 while under the care and supervision of \_\_\_\_\_.  
(PRINT name of person who will be responsible for minor)

Furthermore, I understand that the purpose of this visit is to engage in shooting sports. I am aware that, while all  
safety precautions are taken, there are inherent risks involved with shooting sports that include injury and possible  
death. As such, I give my permission for \_\_\_\_\_ to make any emergency medical  
(PRINT name of person who will be responsible for minor)  
decisions for \_\_\_\_\_.  
(PRINT name of minor)

I have also read and signed the minor waiver form found at <http://www.cscwaiver.com/>.

I understand that, although a copy of this consent form will be kept on file at Chuluota Sportsmen's club, the original  
MUST be retained and brought each time the minor visits the property.

This consent will be considered effective until rescinded by me. To rescind this consent form, I MUST bring, in  
person, a letter stating that I wish to rescind my permission, along with the original signed and notarized copy of this  
document. The original copy of this document, along with the letter to terminate permission, will be retained for ONE  
year and then destroyed following standard document destruction processes.

Date: \_\_\_\_\_

Parent or Legal Guardian Name (Print): \_\_\_\_\_

Parent or Legal Guardian Name (Signed): \_\_\_\_\_

Parent or Legal Guardian Contact Phone Number: \_\_\_\_\_

State of Florida

County of \_\_\_\_\_

**Acknowledgment**

Before me, \_\_\_\_\_, Notary Public on this day personally appeared in physical presence  
\_\_\_\_\_, known to me, or proved by production of valid State or Federal issues photographic  
identification, to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he  
executed the same for the purpose and consideration therein expressed.

Given under my hand and seal of the office this \_\_\_\_\_ date of \_\_\_\_\_, \_\_\_\_\_.  
Month Year

[seal]

\_\_\_\_\_  
Notary Public