

**Smithville FFA Chapter**  
**Smithville R-2 Schools**  
**645 South Commercial**  
**Smithville, MO 64089-9381**  
**Phone (816) 532-0405 Fax: (816) 532-4193**  
**E-mail: [viebrocj@smithville.k12.mo.us](mailto:viebrocj@smithville.k12.mo.us)**



**PARENT CONSENT/PERMISSION & STUDENT PARTICIPATION CONTRACT**

FILE: EEAE-2-E

1. \_\_\_\_\_ has my permission to participate with the FFA Trap Shooting Team organized by the Smithville FFA Chapter for the current school year. I understand my child has read and understands the rules of conduct and safety procedures in shooting activities. Each member will be responsible for their own equipment and expenses throughout the season.
2. My child wishes to participate with the Smithville FFA Trapshooting Team, which will feature team competition in trap, skeet, and sporting clays. I acknowledge that the program will emphasize safe firearm handling and shooting skills and provide for competition at the local, state, and possibly the national level.
3. I understand that by participating with the Smithville FFA Trap Team my child will be engaging in a shooting sport that involves the use of firearms. I understand that there are risks associated with the use of firearms, including serious personal injury and death. By participating in this shooting sport, my child and I agree to assume all risks of personal injury and property damage.
4. In exchange for and as a condition of my child being permitted to participate with the Smithville FFA Trap Team, my child and I agree to the fullest extent allowed by law to assume all liability for any personal injury or property damage that may occur as a result of my child's participation with the Smithville FFA Trap Team and to release, waive, discharge, and covenant not to sue any sponsor or organizer of Smithville FFA Trap Team or any persons associated with events that the Smithville FFA Trap Team should participate, including affiliated gun or sportsmen's clubs, nor any officer, director, employee, agent, or volunteer, from any and all liability or claims that may be suffered by my child or a third party, directly or indirectly, in connection with or arising out of my child's participation.
5. I voluntarily agree to the fullest extent allowed by law to indemnify, hold harmless and defend (including payment of reasonable attorney's fees and costs) any sponsor or organizer of the Smithville FFA Trap Team including affiliated gun or sportsmen's clubs, nor any officer, director, employee, agent, or volunteer, from any and all liability for any damage or injury to any third party arising out of my child's conduct while participating with the Smithville FFA Trap Team.
6. My signature below indicates that I have read and understood the entire consent form and realize it is binding upon myself, my heirs and assigns, and in the event that I am signing it on behalf of any minors or wards, that I have full authority to do so, realizing its binding effect on them as well as myself.

\_\_\_\_\_  
(STUDENT'S SIGNATURE)

\_\_\_\_\_  
(PARENT or LEGAL GUARDIAN'S SIGNATURE)

\_\_\_\_\_  
(Home Ph. Number)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Cell or Work Number)

**MUST RETURN TO MR. VIEBROCK PRIOR TO PARTICIPATING IN ANY SHOOTING EVENTS!**

FFA makes a positive difference in the lives of students by developing their potential for premier leadership, personal growth and career success through agricultural education.