## Individual Entry/Release Form



Alias

CFDA# State

| Division: Men Ladies Youth / Main | Match Shootist? |
|-----------------------------------|-----------------|
|-----------------------------------|-----------------|

If Youth, Annie Oakley \_\_\_\_\_ or Billy the Kid \_\_\_\_\_ / Junior Boy, Girl, or Level 4? I agree that I will not hold the Cowboy Fast Draw Association, LLC, the Host Club, Land Owners,

Lease Holders, Sponsors, Political Subdivisions, Government Entities (or) and officials, officers, employees, members, or servants of such: responsible for any injuries as a result of my participation in any part of this shooting tournament or related activities.

I will also allow my image to be used in conjunction with this event for the promotion of the Sport of Cowboy Fast Draw, Cowboy Fast Draw Association, the host or sponsors.

I acknowledge that Cowboy Fast Draw, by its very nature, has the potential to be dangerous and a serious accident could occur. I assume full responsibility for my actions or that of a minor that I am signing for. I further agree to follow all rules of CFDA, especially those concerning safety & conduct. I will load firearms only at the direction of a Range Officer.

|  | Please Use This Section, Only if there is a Category Match |                     |
|--|--|---------------------|
|  | Annie Oakley   | Ladies 49'r         |
| Printed Name   | Billy the Kid  | Ladies Senior       |
|  | Junior Boy   | Ladies Super Senior |
| Signature  | Junior Girl  | Grand Dame          |
|  | Men's Traditional  | Golden Guns         |
| Date   | Ladies Traditional   | Golden Girls        |
| Note: If Competitor Under 18<br>Parent or Guardian Must Sign Below | Men's 49'r   | Men's Shootist      |
|  | Men's Senior   | Ladies Shootist     |
|  | Men's Super Senior   | Elder Statesman     |
|  | Men's Old Timer  | Stateswomen         |

Parent of Guardian

## Please fill this section out, ONLY if not Pre-Registered

| CFDA#     |  |
|-----------|--|
|           | Last Name:                             |
| Address:  |  |
| City:     | State: Zip Code:                       |
| Phone: () | Cell Phone: ()                         |
| E-Mail:   | Sex: M F Birth Date://<br>(Circle One) |

(Please Print Clearly)