



ATHENA
GUN CLUB

PARENTAL AUTHORIZATION FOR MINOR CHILD TO SHOOT WITH A THIRD PARTY

I, _____ [Enter Parent's Full Name] _____, driver's license # _____ [Enter Parent's DL #] _____,
current home address _____ [Enter Parent's Home Address] _____,

and phone number _____ [Enter Parent's Phone #] _____, acknowledge that I am the
natural parent, adoptive parent, or legal guardian (and NOT step-parent) of the minor child
(under 21 years of age):

_____ [Enter Minor's Full Name] _____, whose date of birth is _____ [Enter Minor's DOB] _____.

I hereby authorize the following listed party or parties, whom I personally know to be 21 years
of age or older, to bring the above-referenced child into Athena Gun Club, to shoot various
firearms. The adult party has been instructed that they must be with the minor child at all times
while the minor child is in the shooting area of the range. I understand and acknowledge
that this Authorization form shall be on file with Athena Gun Club. Only the following person(s)
is authorized to bring my child shooting.

Name: _____ [Enter Guardian's Full Name] _____ Driver's License: _____ [Enter Guardian's DL #] _____

Name: _____ [Enter Guardian's Full Name] _____ Driver's License: _____ [Enter Guardian's DL #] _____

I hereby give my parental consent and authorization:

Date: _____ [Enter Date] _____ Print Name: _____ [Print Parent's Full Name] _____

Signature: _____ [Parent's Signature] _____

***A photocopy of a valid driver's license of the "Parent" authorizing the Intended Party
and the "Guardians" completed **Assumption of Risk and Indemnity Waiver** found in the
FORMS section of our website by the must accompany this form.***