



AMERICAN  
HUNTING LEASE  
ASSOCIATION

## RELEASE & WAIVER OF LIABILITY Salt Log Outfitters Llc, Kathleen, Georgia

Please read this page carefully and fill in & sign & date below

**NO PARTICIPATION IN ANY HUNTING/SHOOTING ACTIVITIES UNLESS THIS FORM IS SIGNED.**

**YOUR SAFETY IS OUR PRIMARY CONCERN. WE EXPECT YOU TO FOLLOW SAFE HUNTING PROCEDURES AT ALL TIMES AND REQUIRE THAT YOU OBSERVE AND OBEY ALL STATE HUNTING REGULATIONS WHILE HUNTING WITH US. FOR YOUR SAFETY AND THE SAFETY OF YOUR HUNTING COMPANIONS, YOU CANNOT PARTICIPATE IN ANY HUNTING OR SHOOTING ACTIVITIES FOR THE BALANCE OF THE DAY AFTER ALCOHOL CONSUMPTION OR ANY DRUG USE RESULTING IN IMPAIRMENT. THE USE OF ILLEGAL CONTROLLED SUBSTANCES ON SALT LOG OUTFITTERS LLC PROPERTY IS STRICTLY PROHIBITED. WE EXPECT YOU TO KNOW YOUR PHYSICAL LIMITATIONS.**

---

## RELEASE AND WAIVER OF LIABILITY

By my signature affixed below I certify I am fully aware of the hazards involved in the sport of hunting and understand the necessary actions to assure hunter safety. I am also aware of the hazards associated with a farm and/or ranching operation. In consideration of being permitted to participate in the sport of hunting conducted by the Salt Log Outfitters Llc, I am willing to assume these hazards and do recognize they can be dangerous to both life and limb.

In full recognition of such, I hereby release, waive and discharge Salt Log Outfitters Llc, its owners, employees, or people with whom they may contract for services, including all landowners (Releasees), from all liability to the undersigned, my spouse, legal representatives, heirs and assigns, for any and all loss, claim or damages resulting therefrom, on account of injury to me or my property, even injury resulting in death, while participating in the sport of hunting and shooting.

This release and waiver is complete as it is my intent to hold harmless and indemnify Releasees for any injury that might result while I am involved in the sport of hunting conducted by Salt Log Outfitters Llc or while on its premises.

The undersigned assumes full responsibility for the risk of bodily injury, death or property damage due to the actions or inactions of Releasees. The undersigned agrees this release, waiver and indemnification agreement is intended to be as broad and inclusive as permitted by the laws of the state of Georgia.

**PRINT YOUR NAME**

**YOUR SIGNATURE/DATE**

\_\_\_\_\_

\_\_\_\_\_

**PRINT WITNESS NAME**

**WITNESS SIGNATURE/DATE**

\_\_\_\_\_

\_\_\_\_\_