

Please return to:
nationalshootingcomplex@nssa-nzca.com

National Shooting Complex

Personal Cart Permit Agreement

Please read carefully before signing

Operator Information

All operators must be 18 years old and hold a valid driver's license.

Primary Operator Name: _____

Phone: _____

Event Information

EVENT NAME:

EVENT DATES:

Cart Information

Check one option below

1. ☐ **Personally owned cart:** Cart Description _____
_____ I have attached or emailed proof of my liability insurance to this agreement.

Cart Permit Agreement and Waiver

In consideration for National Shooting Complex (NSC) issuing a personal cart permit and/or providing a rental cart to operate on NSC property, I agree to the following conditions. In the event that I violate any of these conditions, I agree and understand that further use of the cart may be revoked immediately and without notice.

1. I will operate the cart safely, responsibly and in a sportsmanlike manner, following the rules of operation. Further, I agree that I shall not operate said Cart under the influence of alcohol or illicit drugs.
2. I agree that I am legally and financially liable for the loss, damage, and/or injuries to my person or property and the persons and properties of others, regardless of fault. Responsibility for determination of fault and any legal action to recovered damages rests upon the Operator.
3. I agree to hold harmless, defend, and indemnify National Shooting Complex (NSC) National Skeet Shooting Association (NSSA) and National Sporting Clays Association (NSCA), their officers, agents, employees, contractors and volunteers, for any and all damages and claims of any nature whatsoever, whether or not foreseeable, that may arise from the use of a cart on NSC property whether a personally owned or rented cart during the term of the rental period or of my possession of the cart, including but not limited to claims for damages to the cart itself, my person and property, and the persons and property of others.
4. I agree to waive any and all rights to seek redress against National Shooting Complex. I further agree to waive my right, if any, to punitive damages.

5. I further agree to contact National Shooting Complex immediately if any damages occur to the cart or other persons or property through the use of the cart.
6. I agree that the cart will be driven only by authorized drivers. Authorized driver means: (a) the Customer; (b) the Customer's immediate family; (c) the Customer's employee or co-worker if engaged in a business activity with the Customer; or (d) any person who operates the cart in an emergency, provided that each such person is a licensed driver or is at least age 18.
7. I understand and agree to the following regarding approved cart on NSC property. Shoot management maintains the final say on what vehicles will or will not be allowed on property.
 - a. Vehicles allowed on grounds include golf cart, clays cart, E-ZGo 4x4's, Gator, Mules etc. No ATV's or three wheel vehicles allowed.
 - b. Vehicles may be operated in designated areas only. They may not be driven on county roads.
 - c. Occupancy cannot exceed manufacturer design.
 - d. All carts must not leak or release any noxious fluids; have a USDA approved muffler and spark arrestor and internal combustion.
 - e. No cart is to exceed 20 mph on NSC grounds.
 - f. There is no electrical hook-up to charge the cart.
 - g. Only vertical gun racks are allowed per NSC rules.
 - h. Permit must be displayed at all times. Only persons with proper permit will be allowed on NSC grounds.

I completely and fully understand all Cart vehicle safety procedures and agree to abide by all rules set forth hereinabove. I also understand that I am responsible for any damage or injury caused by me or my vehicle to other persons and their property.

Signature: _____ Date: _____

Payment Information

Turn in the Cart Agreement, payment information to: nationalshootingcomplex@nssa-nsca.com.

\$15 Trail Fee (one-time fee, not per-day fee)

____ Check enclosed for \$ _____

____ Please Charge \$ _____

Credit Card # _____ CVV: _____ Exp: _____

Signature: _____

Daytime Phone: _____