

AFFIDAVIT AND LIABILITY AGREEMENT INFORMATION

To assist in explaining the affidavit requirement for participation in Civilian Marksmanship Program events, the following information is provided.

Congress in Public Law 104-106 enacted in February 1996 imposed the affidavit equipment. This legislation allowed the Civilian Marksmanship Program to continue by transferring it from the Army to a new private entity created by Congress called the Corporation for Promotion of Rifle Practice and Firearms Safety, Inc.

Section 40723 title 36 United States Code provides:

- (1) Before a person may participate in any activity sponsored or supported by the Corporation, the person shall be required to certify by affidavit the following:
 - A) The person has not been convicted of any Federal or State felony or violation of section 922 of title 18.
 - B) The person is not a member of any organization that advocates the violent overthrow of the United States Government.

By definition an affidavit is a statement that is sworn before an official authorized to administer an oath, for example, a notary public. That in brief, is the reason for this procedure. Unless and until the law is changed, we have to comply with it.

There are some steps you can take to minimize the inconvenience. First, each person needs to make the affidavit only ONCE (not at every event). The affidavit need not be completed at the event, but can be done well in advance. For example, the club could distribute the affidavit form to all its members with its next regular mailing, thus cover all of its own members. Event announcements could include a notice that any non-members desiring to participate bring with them a completed affidavit. This affidavit is required only for participants' 18 years of age and older.

Further, there is no requirement to send these affidavits to the CMP. They are to be retained by the club. The club officers simply certify in their annual reports to the CMP that the club requires such affidavits for all participants, and that they are kept on file. The only affidavits that the CMP itself will keep are those we require annually, at the National Trophy Matches.

It should be pointed out that the affidavit has at least one redeeming feature. You will note that the form provided by the CMP has two parts. The first part is the certification required by law, discussed above; the second part is a waiver of liability. This protects the club sponsoring the event as well as the CMP against any claim caused by the carelessness of others. Lawsuits against anyone with the remotest connection to a mishap are an unfortunate fact these days. This can be financially ruinous to many clubs that do not have the resources to fight frivolous claims. The fact that the waiver of liability is included within a document that is notarized reinforces its validity.



ELIGIBILITY AFFIDAVIT AND LIABILITY AGREEMENT

CMP Comp#

- A. To establish my eligibility under section 40723 Title 36 United States Code to participate in any activity sponsored or supported by the Civilian Marksmanship Program (CMP), I hereby certify that:
 - 1. I have not been convicted of any Federal or State felony or violation of Section 922 of title 18 United States Code, and
 - 2. I am not a member of any organization that advocates the violent overthrow of the United States Government.
- B. In consideration for being permitted to participate in any activity sponsored or supported by the Civilian Marksmanship Program, I hereby agree to:
 - 1. Be bound by the Civilian Marksmanship Program Competition Rules.
 - Waive any claim against the Corporation for the Promotion of Rifle Practice and Firearms Safety and any
 other organization sponsoring or supporting the activity for any personal injury, loss or damage that I might
 suffer in connection with the activity, and
 - 3. Defend, indemnify and hold harmless any organization sponsoring or supporting the activity from any claim of a third party arising from any negligent or wrongful conduct by me.

Signed:	Date:	
Name (please print):		
Address:		
City:	State:	Zip Code:
Phone:	Date of Birth:	
Email (optional):		
_	ere if you would like to receive periodic	
* * * * *	* * * * STOP *	****
Thi	s section to be filled out by	y Notary Public
STATE OF		
CITY/COUNTY OF		
	she has read, understands and agrees	making the above certification and agreement, to it, and that the certification is true and correct
SUBSCRIBED and SWORN T	O before me, the undersigned Notar	ry Public, on thisday of,
Notary Public		
My commission expires:		