DNR CO-SPONSORED YOUTH DEER HUNT APPLICATION – 2022
UPSTATE PRIVATE LANDS – REGION 1, UNIT C

YOUTH NAME_____DATE OF BIRTH_____AGE_____

ADDRESS_____CITY, STATE_____ZIP_____

DAYTIME TELEPHONE_____EMAIL_____

SECTION TO BE COMPLETED BY YOUTH (Please answer all questions)

1. What wildlife species have you hunted?
   Circle: Dove Quail Rabbit Squirrel Turkey Deer Other None
2. Who has taken you hunting in the past?
   Circle: No One Father Mother Grandfather Relative Friend
3. How many times have you hunted previously?
   Circle: Never 1 to 3 4 or more Frequently
4. Have you ever attended a DNR co-sponsored youth hunt?
   Circle: Yes No
5. Have you ever killed a deer?
   Circle: Yes No
6. Name, age and telephone number of "new hunter" you are sponsoring and bringing with you?
   Name_____Age_____Telephone_____
   (Note: "New hunters" must also complete and submit an application)

SECTION TO BE COMPLETED BY PARENT OR LEGAL GUARDIAN (Please answer all questions)

1. Do you participate in hunting?
   Circle: Yes No
2. Do you have or could you obtain a suitable firearm for your youngster to use during this hunt?
   Circle Yes No
3. Will you or someone else that comes with you sit with your youngster at this hunt?
   Circle: I will Someone else, Name_____Relationship_____

NOTE – The appropriate signature acknowledges that the youth's parent or legal guardian grant permission for their youth to participate in this special youth deer hunt.

***HUNT WILL BE HELD ON DECEMBER 3, 2022. HUNTERS WILL MEET AT HUNT LOCATIONS IN UNION COUNTY FOR AN AFTERNOON DEER HUNT. DETAILS WILL BE PROVIDED TO SUCCESSFUL APPLICANTS.

Youth Signature_____Date_____

Parent/Guardian Signature_____Date_____

Return to: Union DNR Youth, 124 Wildlife Dr., Union, SC 29379 by 5:00 PM Monday, October 3, 2022.
****LIABILITY/RELEASE WAIVERS MUST BE SIGNED BY YOUTH AND PARENT/GUARDIAN****

LIABILITY WAIVER FORM

I understand that there are risks and dangers inherent in participating in hunting activities. I also understand that in order to be allowed to participate, I must give up my rights to hold liable the State of South Carolina and its agency the South Carolina Department of Natural Resources and all cooperating hosts, sponsors and landowners who accommodate special DNR hunts for any injury or damage which I may suffer while participating in a Department of Natural Resources draw hunt.

Knowing this, and in consideration of being permitted to participate, I hereby voluntarily release the State of South Carolina and its agency the South Carolina Department of Natural Resources and cooperating hosts, sponsors and landowners from any liability resulting from or arising out of my participation in the draw hunt.

I understand and agree that I am releasing not only the entities set forth in the two paragraphs above, but also the officers, agents, and employees of those entities.

I understand and agree that this release will have the effect of releasing, discharging, waiving, and forever relinquishing any and all actions or causes of action that I may have or have had, whether past, present, or future, whether known or unknown, and whether anticipated or unanticipated by me, arising out of my participation. This release constitutes a complete release, discharge, and waiver of any and all actions or causes of action against the State of South Carolina and its agency the South Carolina Department of Natural Resources, and its officers, agents, or employees and cooperating hosts, sponsors and landowners.

I understand and agree that this release applies to personal injury, property damage, or wrongful death, which I may suffer, even if caused by the acts or omissions of others.
I understand and agree that by signing this release, I am assuming full responsibility for any and all risk of death or personal injury or property damage suffered by me while participating in the draw hunt.

I understand that and agree that this release will be binding on me, my spouse, my heirs, my personal representatives, my assigns, my children and guardian ad litem for said children.

I understand and agree that by signing this release, I am to release, indemnify and hold the State of South Carolina and its agency the South Carolina Department of Natural Resources, and its officers, agents, or employees and cooperating hosts, sponsors and landowners harmless from any and all liability or costs, including attorney fees, associated with or arising from my participation in the draw hunt.

Applicant Signature: _____ Date: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Emergency Contact: _____ Telephone: _____

Parent or Guardian Signature: _____ Date: _____

SCDNR Participant Release Agreement

The South Carolina Department of Natural Resources (SCDNR) appreciates your interest and involvement in our programs. In exchange for being allowed to participate, I, the Participant, enter into this Agreement to clearly address certain aspects of my relationship with the SCDNR. I affirm that my involvement with this program is as a participant for educational / personal enrichment purposes and not as an employee or volunteer of the SCDNR. I agree to comply with rules applicable to my program and understand failure to do so may result in my dismissal from the program.

Liability Limitations and Acknowledgement of Risks – I, the Participant, hereby release and hold harmless SCDNR and its officials, employees, and agents from any liability to me for any injury, accident, harm, or other damage to me that arises out of my participation in the program. I further accept and understand that any claims by me against SCDNR, or its officials, employees, or agents, are subject to the limitations of the South Carolina Tort Claims Act. I understand I may be exposed to potential risks from environmental conditions (for example, lightning, fire, smoke, heat, cold, swimming, diving, sharp objects, etc.), rigorous activities, exposure to wildlife and insects, vehicles, boats, equipment, tools, weapons, allergens, first aid or medical treatment for injuries, hunting and fishing activities, and others over which SCDNR may or may not have any control. Taking into consideration my personal health and access limitations for some work locations, I acknowledge that I have the ultimate responsibility to determine whether I can safely participate before engaging in specific program activities.

Photo, Audio, Video Release – I grant the SCDNR permission to use photographs, pictures, audio, and/or video broadcasts or recordings of me (collectively, "Content") as described below. SCDNR may use the Content on the internet and similar platforms/applications, in broadcasts, and in any print or digital form including public presentations, publications, educational materials, derivative works, or similar uses. I understand and agree that the Content may be edited, copied, exhibited, published, or distributed and waive the right to inspect or approve the finished product or any derivative works. I also understand and agree that I may be identified as a participant, including by name, in information that might accompany the Content. My release of Content to SCDNR is a royalty-free, nonexclusive, and permanent / irrevocable right to reproduce, publish, republish, or otherwise use the Content and has no geographic limits. If acquired by or provided to SCDNR, I agree that the Content is and shall remain the property of the SCDNR. I warrant and represent that this grant and release of Content does not in any way conflict with any existing commitment I have made. I forever release SCDNR, its trustees, employees, and agents from any and all claims, demands, rights, promises, damages and liabilities arising out of or in connection with the use or distribution of the Content, including but not limited to any claims for invasion of privacy, appropriation of likeness, or defamation.

By signing this Agreement, I acknowledge that I have completely read and fully understand and agree to be bound to these terms. Additionally, I warrant that I am eighteen (18) years old or more and competent to contract in my own name or, if not, that my parent or legal guardian has signed this Agreement below. This Agreement is binding on me and my heirs, assigns and personal representatives.

_____ _____

Signature Date