

# APPLICATION TO HUNT OR TRAP ABOARD MCB QUANTICO

NOTE: This application must be filled out completely. Falsification of any information is a violation of MCB regulations and will result in the termination of hunting or trapping privileges. PLEASE PRINT ALL INFORMATION.

CHECK ONE:  ANNUAL HUNTING  3-DAY HUNTING  TRAPPING

1. LAST NAME: \_\_\_\_\_ 2. FIRST NAME: \_\_\_\_\_ 3. MI: \_\_\_\_\_ 4. SUFFIX: (e.g., Sr.) \_\_\_\_\_

5. SSN: (Last 4) \_\_\_\_\_ 6. DATE OF BIRTH: \_\_\_\_\_ 7. AGE: \_\_\_\_\_ 8. STREET ADDRESS: \_\_\_\_\_ 9. CITY: \_\_\_\_\_

10. STATE: \_\_\_\_\_ 11. ZIP CODE: \_\_\_\_\_ 12. HOME PHONE: \_\_\_\_\_ 13. WORK PHONE: \_\_\_\_\_ 14. EMAIL: \_\_\_\_\_

15. DRIVERS LICENSE: \_\_\_\_\_ 16. STATE: \_\_\_\_\_ 17. AUTO LICENSE TAG: \_\_\_\_\_ 18. STATE: \_\_\_\_\_

19. PERSONNEL CATEGORY: (Check the first applicable category.)

- 1. Active duty Marine.
- 2. Active duty military (not USMC) at MCB Quantico or HQMC.
- 3. Family member of #1 or #2 above.
- 4. Active duty military.
- 5. Retired military.
- 6. Family member of #4 or #5 above.
- 7. Military reservist.
- 8. Active or retired MCB Quantico civilian employee.
- 9. All other personnel.

20. FOR OFFICE USE ONLY:

MCB LICENSE NUMBER: \_\_\_\_\_

CARD COLOR

GREEN  BLUE  BROWN

ISSUE DATE \_\_\_\_\_

21. CHECK IF APPLICABLE FOR NO-COST HUNTING LICENSE:

UNDERAGE HUNTER (UNDER 18)  SENIOR CITIZEN (65 OR OVER)  DISABLED

22. VA HUNT LICENSE NUMBER: \_\_\_\_\_

23. BIG GAME TAG NUMBER: \_\_\_\_\_

24. FAMILY MEMBER OR HOUSE GUEST: (List the name, telephone number, and address of sponsor below.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**APPLICATION TO HUNT OR TRAP AT MCB.....continued**

**PRIVACY ACT STATEMENT:**

1. **AUTHORITY:** 5 USC 301, 44 USC 3101.

2. **PRINCIPLE PURPOSES:** The information which is solicited is intended principally for the following purpose: To determine the status of personnel at the time of their application for permission to hunt or trap aboard MCB, Quantico, VA, in an effort to allow only authorized personnel aboard the Federal installation.

3. **ROUTINE USES:** To maintain accountability of all persons authorized to hunt game or trap furbearers aboard MCB, Quantico, VA.

4. **VOLUNTARY DISCLOSURE, CONSEQUENCES OF REFUSING TO DISCLOSE:** Disclosure is voluntary. However, if you do not provide the requested information, you may be denied authority to hunt or trap aboard MCB, Quantico, VA.

**SIGNATURE**

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**DATE**

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WAIVER OF LIABILITY

*for*

MARINE CORPS BASE, QUANTICO, VIRGINIA

I understand that I am being granted the privilege (subject to any required permit) to observe/participate in outdoor recreational activities to be conducted under the direction of the Natural Resources and Environmental Affairs Branch, G-5 (Facilities Division), hereinafter the "NREA", aboard Marine Corps Base (MCB), Quantico, Virginia. The activities may include, but are not limited to, hunting, fishing, trapping, archery skills training, and wildlife viewing, and may involve the use of live ammunition, firearms, archery tackle, knives, fishing gear, boats, animal traps, elevated hunting stands, hunting blinds, and other potentially dangerous recreational gear by persons, including me, who have varying levels of proficiency in the use of this gear. **I understand** that these activities may cause injuries association with physical activity like muscle sprains or strains, tendon pulls, dislocation of joints, and broken bones. **I further understand** that these activities may expose me to hazards associated with physical exertion, falls, catastrophic illness, hypothermia, drowning, projectiles, falling debris from trees, toxins and diseases transmitted by plants and animals, and the inherent dangers associated with environmental conditions. **Observation of and/or participation in these activities could result in property damage as well as serious bodily injury or death to me and to others.**

I understand the following three cautions with regard to MCB, Quantico:

1. All water bodies, ranges and training areas, including recreational sites, are designed for and used by the Marine Corps for training its personnel in the deadly art of individual and unit combat. All active weapons ranges have designated but unmarked safety zones known as Surface Danger Zones (SDZs) within which the projectiles from a given weapons system should be contained. I understand that if I leave my assigned activity site, I could enter an active SDZ and expose myself to serious bodily injury or death.
2. Water bodies, ranges and training areas have been subject to countless training exercises that may well have involved the use of ammunition and placement of manmade or natural obstacles which, if triggered or encountered by or during physical presence on the ranges/training areas, could result in serious bodily injury or death to me.
3. Extreme heat, humidity, cold, wind, or wet will increase the likelihood of physical danger and exposure to serious bodily injury, sickness, accident, or death while observing/participating in NREA activities at the water bodies, ranges, and training areas.

**I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THIS AGREEMENT, THAT I AM FULLY AWARE OF THE RISKS INVOLVED IN THESE ACTIVITIES, AND THAT I VOLUNTARILY ACCEPT AND ASSUME THE RISKS ASSOCIATED WITH SUCH ACTIVITIES.**

Printed Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**WAIVER OF LIABILITY**  
**For MINORS UNDER THE AGE OF 18**  
**For MARINE CORPS BASE, QUANTICO, VIRGINIA**

We hereby request that our child, \_\_\_\_\_, be permitted to take part in the Natural Resources and Environmental Affairs Branch, G-5 (Facilities Division), hereinafter the "NREA", sponsored activities to be held on Marine Corps Base (MCB), Quantico, Virginia. The activities include, but are not limited to, hunting, fishing, trapping, archery skill training, and wildlife viewing, and may involve the use of live ammunition, firearms, archery tackle, knives, fishing gear, boats, animal traps, elevated hunting stands, hunting blinds, and other potentially dangerous recreational gear by persons, including my child, who have varying levels of proficiency in the use of this gear. **I understand** that these activities may cause injuries association with physical activity like muscle sprains or strains, tendon pulls, dislocation of joints, and broken bones. **I further understand** that these activities may expose my child to hazards associated with physical exertion, catastrophic illness, hypothermia, drowning, projectiles, falling debris from trees, toxins and diseases transmitted by plants and animals, and the inherent dangers associated with environmental conditions. **Observation of and/or participation in these activities could result in property damage as well as serious bodily injury or death to my child and to others.**

Nonetheless, and in spite of my full knowledge of the risks involved in the NREA activities, I EXPRESSLY AND KNOWINGLY, FREELY AND VOLUNTARILY, AND INTENDING TO BE LEGALLY BOUND, ACCEPT AND ASSUME ALL RISKS INVOLVED IN AND ASSOCIATED WITH ALL ASPECTS OF THESE ACTIVITIES. I EXPRESSLY AND KNOWINGLY, FREELY AND VOLUNTARILY WAIVE ANY AND ALL RIGHTS I/MY CHILD MAY HAVE TO RECOVER FOR ANY INJURY MY CHILD SUSTAINS, OR FOR THE DEATH OF MY CHILD, AND I AGREE TO HOLD HARMLESS THE UNITED STATES GOVERNMENT, THE DEPARTMENT OF DEFENSE, THE DEPARTMENT OF THE NAVY, THE UNITED STATES MARINE CORPS, THE MARINE CORPS COMBAT DEVELOPMENT COMMAND, AND MARINE CORPS BASE QUANTICO.

Therefore, in consideration of the privilege to participate in the NREA activities to be held aboard MCB Quantico, I the undersigned person do hereby freely and voluntarily, and intending to be legally bound, accept all risks associated with the NREA activities, and any use I may make of MCB Quantico, or government equipment or facilities in furtherance of my child's participation in the NREA activities, and waive any and all rights to any claims or demands or any other actions whatsoever, including those attributable to negligence, for damages, due to accident, injury, or death, resulting from my child's participation in the NREA activities for myself, my spouse, my parents or guardians, my heirs, executors, administrators, or legal representatives of my estate, or anyone else on my behalf, which I may have against any of the following: the United States of America, the Department of Defense, the Department of the Navy, the United States Marine Corps, Marine Corps Combat Development Command, Marine Corps Base Quantico,

\_\_\_\_\_  
Initial            Date

**WAIVER OF LIABILITY**  
**For MINORS UNDER THE AGE OF 18**  
**For MARINE CORPS BASE, QUANTICO, VIRGINIA**

or any and all individuals assigned to or employed by the United States, to include but be not limited to, the Secretary of the Navy, the Commandant of the Marine Corps, the Commanding General of the Marine Corps Combat Development Command, or the Commander of Marine Corps Base Quantico, in their official and personal capacities, or any medical personnel assigned thereto, or their representatives, successors, or assigns. I understand that the above language means I have abandoned any rights I may have, or any rights anyone associated with me may have, through legal or friendship or family ties, to sue the federal government for any injury my child may sustain because of participation in or attendance at the NREA sponsored activities that results in any damage whatsoever to my/my child's property or in the event of my child's death. By signing this document, I acknowledge that the federal government, or any agency or employee thereof, is not liable for any injury my child may sustain, to include death, as a result of my child's participation in the NREA sponsored activities. By signing this document, I effectively and completely assume all risk associated with the NREA sponsored activities. This document shall remain in effect and be held until notice of cancellation is received by the Commander, Marine Corps Base, Quantico.

**I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THIS AGREEMENT, THAT I AM FULLY AWARE OF THE RISKS INVOLVED IN THESE ACTIVITIES, AND THAT I VOLUNTARILY ACCEPT AND ASSUME THE RISKS ASSOCIATED WITH SUCH ACTIVITIES.**

Lastly, I understand that should I decline to execute this Waiver of Liability, my child will not be permitted to participate in the NREA activities to be held aboard MCB Quantico.

\_\_\_\_\_  
**Printed Name** of Mother/Father/Legal Guardian (circle one)

\_\_\_\_\_  
**Signature** of parent/Legal Guardian

\_\_\_\_\_  
Date

On behalf of:

\_\_\_\_\_  
**Printed Name** of Minor Child

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Emergency Point of Contact

\_\_\_\_\_  
Phone Number

Health Insurance Coverage: Please **initial** the appropriate box.

No, I **do not** have health insurance \_\_\_\_\_

Yes, I **do** have health insurance coverage \_\_\_\_\_ (continue below)

\_\_\_\_\_  
Name of Insurance Provider

\_\_\_\_\_  
Policy #

Attachment II

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