

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]

[Recipient's Name]
[Recipient's Address]
[City, State, Zip Code]

Dear [Recipient's Name],

Subject: Consent for BB Gun Training

I, [Your Full Name], hereby give my consent for [Participant's Full Name], my [relationship to participant, e.g., son/daughter], to participate in BB gun training provided by [Training Organization/Instructor's Name].

I acknowledge that I have read and understood the training program's details, including the safety protocols and potential risks involved. I affirm that [Participant's Name] is capable of adhering to all safety instructions and guidelines during the training sessions.

I release [Training Organization/Instructor's Name] from any liability in case of accidents or injuries that may occur during the training.

Please find attached any necessary medical information or considerations regarding [Participant's Name].

Thank you for your attention to this matter.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]

[Your Relationship to Participant]

[Your Emergency Contact Number]