

FORT HOOD AREA ACCESS REGISTRATION

(For use of this form, see FH Reg 210-3. Proponency is DFMWR.)

1. NAME: <i>(Last, First, MI)</i>			2. ADDRESS: <i>(Please complete in entirety)</i> a. UNIT (If reside in barracks). b. NUMBER AND STREET: c. CITY: d. STATE: _____ e. ZIP CODE: _____		
3. YOUR CATEGORY OR SPONSOR'S CATEGORY: a. ACTIVE DUTY: b. BRANCH: _____ c. RANK: _____ OR d. RET e. DV f. DOD g. CIV			4. DATE OF BIRTH: _____		
5. TELEPHONE NUMBERS: a. HOME: b. CELL: c. WORK:			6. LAST FOUR (4) SSN: _____		
7. EFFECTIVE DATE: _____			8. EXPIRATION DATE: _____		
9. VEHICLE INFORMATION:					
MAKE a.	COLOR b.	MODEL c.	YEAR d.	PLATE NO. e.	STATE f.

RELEASE AND HOLD HARMLESS AGREEMENT SECTION 1

For and in consideration of access to and use of Fort Hood training areas for recreational and other purposes authorized by the proper Fort Hood officials (an access pass is required for each entry), the undersigned does hereby release and discharge the Department of the Army, its agents, servants, and employees of and from any and all liability, actions, claims, demands, or suits whatsoever, that the undersigned may acquire on account of, arising out of, or in conjunction with the use of training areas by the undersigned or the United States Army and its personnel. The undersigned assumes all risk incident to entry into and use of Fort Hood training areas. Further, the undersigned assumes responsibility for informing those accompanying him of the risks for serious injury undertaken when entering or using Fort Hood training areas because Fort Hood training areas contain unexploded munitions both above and below the surface and are used for military training involving high speed vehicles and weapons fire. The undersigned is fully aware that training including weapons fire may continue in training areas while the undersigned is present in training areas. This Release and Hold Harmless Agreement covers all injuries, both fatal or nonfatal, illness of every kind or nature, and personal property damage which may be sustained or suffered from any cause whatsoever connected with or arising out of use of Fort Hood training areas.

Further, the undersigned agrees to indemnify and hold harmless the Department of the Army, its agents, servants, and employees, of and from any and all expenses, claims, demands, suits, and causes of actions asserted by any person, firm, or corporations for personal injury or property damage incurred as a result of or arising from intentional, reckless, or negligent acts or omissions of the undersigned while in Fort Hood training areas. The undersigned agrees to allow no damage or destruction to Fort Hood training areas and to leave the training area in essentially the same condition as when the undersigned entered the area. The undersigned specifically promises to immediately inform Range Division of any damage caused to training areas or hazards created in training areas by the undersigned. The undersigned agrees to bear the expense of repairing any damages or removing any hazards created by the undersigned.

The undersigned further warrants that no promise or agreement not herein expressed has been made, that this release is not executed in reliance on any statement or representation made by the party (parties) hereby released or said party's (parties') representatives or agents, concerning any thing or matter.

10. DATE: _____	11. SIGNATURE: _____
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SECTION II

The undersigned hereby gives, as parent or legal guardian of the below listed individual(s), my permission for entry upon and use of Fort Hood training areas. I join in all releases of and agreements to indemnify the Department of the Army signed by the below listed individual(s). Further, in consideration of the access to and use of Fort Hood training areas granted my family member(s) or ward(s), the undersigned hereby releases and agrees to indemnify and hold harmless, as set out in Section I of this document, the United States Army, its agents, servants, and employees with respect to injuries to the person or damage to the property of the below listed individual(s) or injuries to persons or damage to property caused by the below listed individual(s). The individual(s) covered by Section II of this document is (are):

12. CHILD'S NAME		13. AGE:
14. CHILD'S NAME		15. AGE:
16. CHILD'S NAME		17. AGE:
18. CHILD'S NAME		19. AGE:
20. CHILD'S NAME		21. AGE:
22. DATE:	23. PRINTED NAME:	24. SIGNATURE:

PRIVACY ACT STATEMENT:

AUTHORITY: Title 10, USC, Section 3012(g). Reason: This information will be used for emergency contact or to verify personnel have departed training areas. Routine Uses: For use by Area Control Center to ensure safety of visitors and/or facility users. Disclosure: voluntary, however, failure to provide information will result in area access not being granted.