



**NEW ORLEANS**  
**MILITARY & MARITIME**  
**ACADEMY**

I authorize my son/daughter, CADET \_\_\_\_\_  
to participate in the 2024-2025 **Marksmanship Training** conducted by the New Orleans  
Maritime and Military Academy High School MCJROTC program. I grant consent with  
the knowledge that the training will involve the instruction of marksmanship safety and  
firing of air rifles. I understand that we may arrange to visit the range facility being used  
and account ourselves with procedures and safety pre-cautions upon request.

\_\_\_\_\_  
**Signature of Parent or Legal Guardian**

\_\_\_\_\_  
**Address**

\_\_\_\_\_  
**Telephone Number**

**THIS FORM IS MANDATORY FOR ALL 9<sup>th</sup>  
AND 10<sup>th</sup> GRADE CADETS**