

General Dynamics Ordnance and Tactical Systems
SIMUNITION® OPERATIONS

ACCEPTANCE OF CONDITIONS
TO PURCHASE THE SIMUNITION® PRODUCT LINE

I, _____
(name) printed letters

Representing : _____
Training Facility

Fully understand and agree to strictly adhere to the stated conditions required to purchase the SIMUNITION® Product Line. ***I UNDERSTAND THAT BUYERS AND USERS OF THE SIMUNITION® PRODUCT LINE AT THE ABOVE SPECIFIED TRAINING FACILITY, ACKNOWLEDGE THAT THEY ASSUME ALL RISK OF USE.***

SIGNATURE

Name (print or type) Title

Notary Public

Date