

WHITE MOUNTAIN PRACTICAL SHOOTERS

CLUB MEMBERSHIP AGREEMENT AND RELEASE 2018 YEAR

NAME _____ USPSA # _____

ADDRESS _____

CITY _____ STATE/ZIP _____

PHONE _____ EMAIL _____

****ATTENTION** You will receive email notifications of upcoming matches, scores and Club business.**

EXPERIENCE (check all that apply) - NONE TARGET PRACTICE COMPETITION (type) _____

HUNTING MILITARY L/E PISTOL RIFLE SHOTGUN OTHER _____

SHOOTING DISCIPLINES I AM INTERESTED IN (check all that apply)-

USPSA STEEL CHALLENGE MULTIGUN LONG RANGE IDPA COWBOY ACTION

BULLSEYE BLACKPOWDER SPORTING CLAYS/SKEET ARCHERY JUNIOR WOMEN

TARGET PRACTICE CLASSES OTHER _____

I AM APPLYING FOR MEMBERSHIP DETAIL INDIVIDUAL \$25 FAMILY \$35

SPONSORED BY - _____

I, _____, acknowledge that I voluntarily have chosen to join WHITE MOUNTAIN PRACTICAL SHOOTERS. I am aware that activities performed by members such as myself include using firearms at the shooting range and offsite matches.

I AM AWARE THAT THESE ACTIVITIES ARE HAZARDOUS ACTIVITIES AND THAT I COULD BE SERIOUSLY INJURED OR EVEN KILLED. I AM VOLUNTARILY PARTICIPATING IN THESE ACTIVITIES WITH KNOWLEDGE OF THE DANGER INVOLVED, AND AGREE TO ASSUME ANY AND ALL RISKS OF BODILY INJURY, DEATH OR PROPERTY DAMAGE, WHETHER THOSE RISKS ARE KNOWN OR UNKNOWN. BY SIGNING THIS DOCUMENT, I AM WAIVING ANY AND ALL LIABILITY ACTIONS WHICH I MIGHT PURSUE AGAINST WHITE MOUNTAIN PRACTICAL SHOOTERS CLUB FOR ANY AND ALL BODILY INJURY OR INJURIES, DEATH OR DEATHS, OR PROPERTY DAMAGE, INCLUDING ANY AND ALL LIABILITY ACTIONS ARISING OUT OF NEGLIGENCE ON THE PART OF WHITE MOUNTAIN PRACTICAL SHOOTERS CLUB, ITS AGENTS, OFFICERS, AND/OR MEMBERS.

I verify this statement by placing my initials here: _____

Parent or Guardian's initials (if under 18): _____

As consideration for being permitted by WHITE MOUNTAIN PRACTICAL SHOOTERS CLUB to become a member and to participate in the aforementioned activities, I forever release WHITE MOUNTAIN PRACTICAL SHOOTERS CLUB, and their respective directors, officers, employees, volunteers, agents, contractors, and representatives (collectively "Releasees") from any and all actions, claims, or demands that I, my assignees, heirs, distributees, guardians, next of kin, spouse and legal representatives now have, or may have in the future, for injury, death, or property damage, related to (i) my participation in these activities, (ii) the negligence or other acts, whether directly connected to these activities or not, and however caused, by any Releasee, or (iii) the condition of the premises where these activities occur, whether or not I am then participating in the activities. I also agree that I, my assignees, heirs, distributees, guardians, next of kin, spouse and legal representatives will not make a claim against, sue, or attach the property of any Releasee in connection with any of the matters covered by the foregoing release.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND WHITE MOUNTAIN PRACTICAL SHOOTERS CLUB, , AND I SIGN IT OF MY OWN FREE WILL. I also understand this release and waiver shall remain in affect while I am a member of the WHITE MOUNTAIN PRACTICAL SHOOTERS CLUB.

PARTICIPANT Signature: _____

RELEASOR PARENT OR GUARDIAN

Signature: _____

Address: _____

IF YOU ARE UNDER 18 YEARS OF AGE, YOU AND YOUR PARENT OR GUARDIAN MUST SIGN AND INITIAL THIS FORM WHERE INDICATED. If Signed by Parent or Guardian: I verify that the dangers of the activities and the significance of this Release and Waiver were explained to the Member and that the Member understood them.