



Schultz Resort Rod & Gun Club

Application for Membership

20__

Name: _____ Phone: () _____

Address: _____ DOB: ___/___/___

City: _____ State: _____ Zip: _____

Spouse or Significant Other: _____ DOB: ___/___/___

E-mail:

1. We really need an e-mail address for everyone if possible as most club communication will come by e-mail.

2. Sign release and acknowledgement of club rules.

I am an adult, not legally prohibited from owning, possessing or using firearms or archery equipment. I am aware of the inherent hazards involved with the use of firearms and archery equipment, and of the basic safety rules for use of firearms and archery equipment. If I am signing for a minor, I am an adult parent, relative, or legal guardian of that minor. In consideration of being allowed use of the premises and facilities of the Schultz Resort Rod and Gun Club, Inc. (hereinafter, SRRGC), I assume all risks of loss or damage to person or property, whether to myself, to others, or to those in my charge, whether foreseen or unforeseen, arising out of my membership in SRRGC. I agree that I, my heirs, or others claiming through me, will not make claim against or sue SRRGC, its members, officers, or any affiliated organizations, for injury or damage, caused by negligence or otherwise, arising out of my membership in SRRGC. Further, I release and discharge SRRGC, its members, officers, and any affiliated organizations, from all claims or causes of action I, my heirs, or others claiming through me, may have, now or hereafter, for injury or damage, arising from my attendance or participation in activities at SRRGC. I further acknowledge that I have received a current copy of the rules and regulations of SRRGC, and agree to abide by these at all times. I understand that my membership is good for one calendar year expiring on December 31st, no matter the month joined, but also may be suspended or revoked without refund at any time for violation of club rules or bylaws by myself, my family or my guests.

Signature: _____ Date: _____

3. Please complete this short survey.

What activities does this club offer that you are interested in?	Continued	Are you a current member of:	Administrative Checklist (used internally by BOD)
<input type="radio"/> Open Rifle <input type="radio"/> Open Pistol <input type="radio"/> Open Archery <input type="radio"/> USPSA <input type="radio"/> GSSF <input type="radio"/> IDPA	<input type="radio"/> Bowling Pins <input type="radio"/> Classes <input type="radio"/> Pistol League <input type="radio"/> Archery League <input type="radio"/> Trap <input type="radio"/> NRA Events	NISA <input type="checkbox"/> Yes WE Energies <input type="checkbox"/> Yes NRA <input type="checkbox"/> Yes	<input type="checkbox"/> Current Rulebook <input type="checkbox"/> Fob/access code <input type="checkbox"/> Membership Card <input type="checkbox"/> Safety Class Scheduled <input type="checkbox"/> Other _____

I need an extra card/button for my spouse (\$5.00) Spouses name for card: _____

I need an extra fob for my spouse (\$10.00, give name above) I need a replacement fob (\$10.00)

Organization membership is good for one calendar year expiring on December 31st, no matter the month joined

Date Membership Approved _____ Amount Received _____ Received By _____