Annual Membership Dues: Adult Junior (<18 years) Associate (Spouse) Expiration:	850.00 \$20.00 \$15.00 Dec. 31 Current year	After Labor Day \$65.00 \$30.00 \$20.00 Dec. 31 Following year	<u>Life</u> \$350.00
Name:	Street Address:	City:	State: Zip:
Home Phone:	Mobile Phone:	E-Mail:	
Affiliations: NRA: MUCC: DUC	CK UNL: Other: Have	you ever been convicted of a fe	lony? YES NO
EMERGENCY CONTACT:			
Name:	Street Address:	City:	State: Zip:
Home Phone:	Mobile Phone:	E-Mail:	
GLENNIE SPORTSMAN CLUB WAIVER OF LIA	ABILITY	Release of Risk	& Indemnity Agreement
For and in consideration of Participants member events and shooting range privilege, the Particip for personal injury, property damage or wrongfu activities incidental thereto whenever or however claims, rights, and causes of action that Participasso on behalf of Participant's heirs, Executors, Ad Participant, Participant's Parent or Legal Guardia understand that such activities involve risks to P damages which may arise there from and that the Participant or negligence of others, including the known to us or are not reasonably foreseeable a GSC. Copies are available to GSC members upon Participant, Participant's Parent or Legal Guardia and event areas and related premises and acknown action, arising from the performance, or failure to warn of dangerous conditions existing at said lt is the purpose of this agreement to exempt, we death caused by their negligence. Release includes	ants, Participants Parent or Lega all death occurring to Participant are they occur and for such period ants may have are hereby relinquiministrators and Assigns.  In understand and assume all rist articipants person including bodiney have full knowledge of said rist erelease identified below. It is function that this timer. I agree to abide by a request.  In understand and assume the rist perform maintenance, inspect shooting range or event areas.  It is and relieve releases from liate the GSC and its Elected Officer	I Guardian relinquishes any and all arising out of participation of GSC ell said activities may continue, and buished and the Participant, Participants inherent in GSC events and shoot ly injury, partial, or total disability, sks. These risks and dangers may burther acknowledged that there may not be bound under the rules of GSC isks, if any, arising from the conditional cluded within the scope of this wait ion, supervision or control of said a sbility for the personal injury, propers, Shooting Range Officers, Event here	liability for and cause of action vents and shooting range by this agreement any such ant's Parent or Legal Guardian ting range activities and paralysis, and death, and e caused by negligence of the y be risks and dangers not C, including the By-laws of the cons and use of shooting range wer and release any cause of areas and the failure of release enty damage, and wrongful osts, other Participants,
Officials, Sponsors, Advertisers, Owners and Per Agents and Employees. Participant, Participant's Parent or Legal Guardia relied upon any representations of releases, that events and understand these waivers and releas	an acknowledge that they have b t they are fully advised of the pot	een provided and have read the ab ential dangers of GSC shooting ran	ove paragraphs and have not ge activities and other GSC
GSC insurance policy, which could affect any cov			
CONSENT TO MEDICALLY TREAT			
Participant, Participant's Parent or Legal Guardia with emergency medical care from any licensed and associated with the participation of GSC sho	physician, hospital, clinic, certifie	ed EMT or Shooting Range Officer o	
PRINT PARTICIPANTS NAME:		Age:	
SIGN PARTICIPANTS NAME;		Date;	
SIGN PARENT OR GUARDIANS NAME:		Date:	

Received by: \_\_\_\_\_CHECK NUMBER: \_\_\_\_CASH: \_\_\_\_EXPIRATION: \_\_\_\_