

Williams Sportsman's Club

www.williamssportsmansclub.com



APPLICATION FOR NEW MEMBERSHIP (PLEASE PRINT)

First Name: _____ Middle: _____ Last: _____
 Mailing Address: _____ Unit #: _____
 City: _____ State: _____ Zip Code: _____
 Phone: (____) _____ Cell: (____) _____ E-mail: _____

RANGE DAYS / HOURS: WINTER: December - March: Wednesday, Saturday & Sunday - 10:00am - 2:00pm
SUMMER: April - November: Wednesday, Saturday & Sunday - 9:00am - 1:00pm

MEMBERSHIP(S)	MEMBERSHIP DESCRIPTION October or later signup extends membership to the end of the follow year	FEES
SINGLE -- \$30.00	Individual Adult: 18 years of age or older	
SENIOR -- \$20.00	Individual Senior: 60 years of age or older Date of Birth (D.O.B) _____	
FAMILY -- \$50.00	Individual Membership plus Spouse or Significant other and all children under the age of 18 years and living at home.	
SPOUSE	Name: _____	
	Phone Number: _____	
	email: _____	
YOUTH	Name: _____ D.O.B.: _____	
	Name: _____ D.O.B.: _____	
	Name: _____ D.O.B.: _____	
	Name: _____ D.O.B.: _____	
Must be Accompanied by Adult - Adult Must Sign Waiver		N/C
MILITARY	Active Duty Only , We are Proud to Support our Military. (ID Required)	N/C
LIFETIME	Individual Lifetime Membership	\$400.00
		TOTAL:

Certification by Applicant: I certify that I am a citizen of good repute of the United States of America, or legally in the U.S.

I may legally own or possess firearms in the state of Arizona and I am not a member of any organization or group having its purpose to overthrow by force or violence, the government of the United States and that if admitted to membership, I will fulfill the obligation of good sportsmanship, conduct and citizenship. I have read, signed and agree to the terms and conditions of the "Agreement and Release of Liability Form" as approved by the Williams Sportsman's Club on the reverse page of this form.

Dated: _____ Print Name: _____ Signature: _____

INSTRUCTIONS FOR SUBMITTING THE APPLICATION FOR MEMBERSHIP

Upon completion of this form, mail form and check payable to: "Williams Sportsman's Club" for the type of membership desired. Mail to: **Williams Sportsman's Club, PO Box 131, Williams, AZ. 86046-0131.** If you have any questions, contact the Williams Sportsman Club at: WSCAZ2020@Hotmail.com or visit the WSC website at WWW.williamssportsmanclub.com

Amount paid: _____ Check# _____ Cash: \$ _____

Received by: _____ Date: _____

Turn this Form over, Read & Sign the Second Page

WILLIAMS SPORTSMAN'S CLUB

AGREEMENT AND RELEASE OF LIABILITY

I hereby acknowledge that I voluntarily apply to participate in the shooting activities of the Williams Sportsman's Club (WSC) at the City of Williams Shooting Range and as a member, I am entitled to a membership card, access to the members area of the WSC website, range access on open range days (subject to determination or change by the WSC or the City of Williams), use of one target stand as available and reduced WSC event or match fees. I am aware that activities include not only shooting, but also every action and activity I engage in while on the City of Williams Shooting Range. These include but are not limited to, parking of my vehicle, participation in hunter education classes, archery events, casing and uncasing firearms, assisting with club or range activities, competitions, special events and walking between different areas of the range.

No one under the influence of alcohol or drugs will be permitted to use the range. **There will be NO exceptions.** I acknowledge that the consumption of alcohol or drugs while on the City of Williams Shooting Range Property is forbidden at all times and will result in being immediately banned from the range. If I am banned from the range due to illegal activity I will be required to petition the City of Williams Parks & Recreation Commission and WSC for approval or reinstatement of privileges.

I am aware the shooting sports and the handling of firearms are inherently hazardous activities. Knowing this, I am voluntarily participating in these shooting activities. I am aware of the danger involved, I hereby acknowledge and agree to accept any and all risk of injury and / or death.

As lawful consideration for having been permitted by WSC, associated individuals or one of it's organizations to participate in using the City of Williams Shooting Range facilities, I hereby agree that I, my heirs, guardians, legal representatives and assigns **WILL NOT SUE**, make claim against, attach property of, or prosecute the City of Williams, United States Forest Service, WSC, the WSC board members, or any associated organizations and / or sponsors, owners, partners, officers or employees. As a result of my participation in the shooting or range activities, I hereby release and discharge from all claims or demands, I, my heirs or guardians, legal representatives, or assigns I now have or may have thereafter for injury or damage resulting from participation in shooting range or club activities.

I know, understand and will obey the range rules. I assert that I am competent to handle firearms and/or archery equipment in a safe manner. I will handle my firearm or archery equipment only under the direction and / or supervision of a WSC Range Safety Officer or other official.

I acknowledge and agree that drawing the firearm, reloading, movement on the range and holstering a firearm are dangerous activities, and I acknowledge the fact that I could injure others or myself. I agree to follow the commands of the WSC Range Safety Officers or other officials while actively participating at the City of Williams Shooting Range.

I understand that my failure to abide by the safety instructions either in this agreement or as posted at the range or as directed or given to me by a Range Safety Officer may result in the immediate expulsion from the range and forfeiture of my range use and / or match fee.

Print Name: #1. _____ #2. _____

Signature: #1. _____ #2. _____

Date: #1. _____ #2. _____

The above signee(s) accepts liability for any minors and/or family members under his/her care as listed under the "Family" membership category or otherwise noted.

I AGREE TO ABIDE BY THE WSC RANGE RULES BELOW AS WELL AS ALL ADDITIONAL POSTED RULES.

1. ALWAYS POINT THE MUZZLE IN A SAFE DIRECTION.
2. ALWAYS KEEP YOUR FINGER OFF THE TRIGGER UNTIL READY TO SHOOT
3. TREAT EVERY FIREARM AS IF IT IS LOADED.
4. DO NOT HANDLE ANY FIREARM DURING A "COLD RANGE".
5. Always Wear Eye and Hearing Protection During Shooting.
6. Always Follow The Commands Of The Range Safety Officer (RSO).
7. Be Sure Of Your Target And What Is Beyond It.

