



# South Umpqua Rod and Gun Club

P.O. Box 639  
Canyonville, OR 97417



Trap

Rifle

Pistol

Muzzle Loaders

Archery

## Application For Membership

Date: \_\_\_\_\_

I, \_\_\_\_\_ wish to apply for membership in the South Umpqua Rod and Gun Club, and hereby submit this application, along with a check or Money Order for the applicable dues.

**Membership runs from July, 1<sup>st</sup>. to June, 30<sup>th</sup>.**

**Family Membership** dues are \$48.00 per year, and are pro-rated at \$4.00 per month until the next July.

(Family includes couple and immediate family under 18 yrs. of age.)

**Disabled Veteran** dues are: 10-to-79% disabled = \$40.00/yr., 80-to-100% disabled = \$30.00/yr. (Supporting documentation must be presented.)

Dues are prorated at \$3.33/month, and \$2.50/month, respectively.

**Please PRINT, and BOTH sides of this application must be completed.**

Name: \_\_\_\_\_ Spouse/Significant Other: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

E-Mail: \_\_\_\_\_

NRA Membership Number (if applicable): \_\_\_\_\_

**I agree to comply with all commands of the Range Safety Officer, and to abide by all rules set forth by the South Umpqua Rod and Gun Club while on the grounds, and will conduct myself in a sportsmanlike, and safe manner at all times. I understand my membership may be terminated for unsafe or disruptive behavior.**

Signed: \_\_\_\_\_ Witness: \_\_\_\_\_ Date: \_\_\_\_\_

(member in good standing)

**Mail this application and check/money order to address at top. Membership card will be sent to you.**

**Please also complete other side.**



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# **MEMBERSHIP LIABILITY** **AND RISK WAIVER**

Please PRINT, and BOTH sides of this application must be completed.

**I personally assume all risks incident to my participation in the South Umpqua Rod and Gun Club, including, but not limited to the shooting events and obstacle course. In consideration of your accepting my entry, on behalf of myself, my family, my heirs, executors, trustees, and administrators, I hereby release all sponsors of any event, including but not limited to the South Umpqua Rod and Gun Club and its officers from any and all claims or courses of actions related to, or arising from my participation in this club.**

**I further agree to comply with the requests, and decisions of the Range Safety Officers.**

**Name (Print):** \_\_\_\_\_

**Agency, if applicable:** \_\_\_\_\_

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent of Guardian Signature,**

**If member is under 18 years of age:** \_\_\_\_\_

**Complete both sides of this form. Mail completed form and check/money order to address at top of form.**