## **NEVADA RANGERS 438 Scenic Drive** Henderson, NV 89002



## (COWBOY ACTION SHOOTERS SOCIETY)

## **2023 MEMBERSHIP APPLICATION & RENEWAL**

(January	to	December	2023)
(canaar )		December	~~~)

(Place an "X" in appropriate [ ]'s) [ ] <u>Single</u> Membership Fee is <b>\$30.00</b>						
	\$					
[ ] Additional Fami	\$					
	(Number of additional fa					
[ ] Life Membership	Fee is <b>\$200.00</b>		\$			
		Total	Fees Due\$			
(M	lake check payable to <b>Nevada Rangers</b> a	and if mailing use the above address)				
Name	Alias					
Address	City	State:	Zip			
SASS#	NRA#	Date of Birth				
Home Phone	Cell Phone	Work Phone				
E-mail						
	Phone Numbers					
Family Member Name		Alias				
Address	City:	State:	Zip			
SASS#	NRA#	Date of Birth				
Home Phone	Cell Phone	Work Phone				
E-mail						
Emergency Contact	Phone Numbers					

## PLEASE READ CAREFULLY

You are participating in a sport in which certain damages and risks may arise; including but not limited to, accidental injury, illness, and the forces of nature. In consideration of the right to participate in this sport, and of the services provided by the Nevada Rangers and its agents, you do hereby assume the risks associated with the sport. You the contestant, at your own expense, shall defend management and/or all sponsors, and their members or employees, from all such claim and indemnify them from any and all liability, damage and cost arising from injury to person or property, occasioned by an act or omission by you the contestant.

I (we) hereby apply for membership in the Nevada Rangers. I (we) certify that if admitted as a member, I (we) will fulfill the obligations of a good sportsman and abide by the rules and regulations. I (we) acknowledge that I (we) have received a copy of the rules and regulations.

Signature		Date					
Signature		Date					
Parental Consent for Minor							
Minor's Name	_ is years o	old and has my permise	sion to become a member of the <b>Nevada</b> R	angers.			
Signature of Parent or Guardian	Date						
FOR OFFICE USE ONLY:							
Circle Method of Payment [Cash]	[Check]	Collected by	Date				
Device of 0000 Marsharship Application & Device							