## NEVADA RANGERS 438 Scenic Drive Henderson, NV 89002



## (COWBOY ACTION SHOOTERS SOCIETY)

## **2021 MEMBERSHIP APPLICATION & RENEWAL**

(January	to	December	2020)
----------	----	----------	-------

(Place an "X" in ap	propriate [ ]'s)				
[ ] <u>Single</u> Membership Fee is \$30.00	\$				
[ ] <b>Family</b> Membership Package For 2 Memberships the fee is \$45.00					
[ ] Additional Family Members	x \$15.00	\$			
(Number of additional family members)					
[ ] Life Membership Fee is <b>\$200.00</b>		\$			
	Total	Fees Due\$			

(Make check payable to Nevada Rangers and if mailing use the above address)

Name	Alias					
Address	City	State:	Zip			
SASS#	NRA#	Date of Birth				
		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		ne 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 Consen			
Minor's Name	_ is years o	old and has my pern	nission to bec	ome a member of the Ne	vada Rangers.
	Date				
FOR OFFICE USE ONLY:					
Circle Method of Payment [Cash]	[Check]	Collected by	(Initials)	Date	
2020_Membership Application & Renewal_1					