ROCHESTER BROOKS GUN CLUB

962 HONEOYE FALLS #6 ROAD ~ RUSH, NEW YORK 14543 ~ (585) 533-9913

OFFICE USE MEMBERSHIP 2024 MEMBERSHIP FROM JANUARY 1 – DECEMBER 31 Pd. ForeUp C **NEW REGULAR** \$335.00 INCLUDES SPOUSE/SIGNIFICANT OTHER & MINOR CHILDREN Gate NEW NON RESIDENT \$135.00 MUST RESIDE OVER 50 MILES FROM CLUB. NO HUNTING OR VOTING PRIVILEGES LR NEW STUDENT \$100.00 (Full Time 12+Cr. Hrs.) ATTACH COPY OF STUDENT ID AND CURRENT COLLEGE SCHEDULE. STUDENT Assoc. MEMBERS CAN ONLY BRING ONE GUEST AT A TIME. NO HUNTING OR **VOTING PRIVILEGES** Home Phone () _____ NAME Work Phone () _____ STREET _____ DATE OF BIRTH CITY _____ STATE ____ ZIP ____ E-MAIL ADDRESS _____ *Family Associate Member - If a spouse/significant other has completed the orientation class and has BEEN ISSUED A CLUB ID /GATE ENTRY CARD, ENTER THEIR NAME HERE. *AVAILABLE ONLYWITH A REGULAR MEMBERSHIP **EMERGENCY CONTACT INFORMATION** EMERGENCY CONTACT: HOME PHONE () WORK PHONE () **EMPLOYMENT INFORMATION** JOB TITLE EMPLOYER ADDRESS SHOOTING AND CLUB INTERESTS WHAT IS YOUR PRIMARY SHOOTING INTEREST? WHAT OTHER SHOOTING SPORTS HAVE YOU PARTICIPATED IN? ARE YOU INTERESTED IN VOLUNTEERING? CIRCLE ANY AREAS IN WHICH YOU WOULD LIKE TO HELP THE CLUB: TRAP SKEET FINANCE MARKETING CLAYS RIFLE & PISTOL INTERNATIONAL EQUIPMENT MAINTENANCE VEHICLE MAINTENANCE BLDG. & GROUNDS MAINTENANCE CHARITY EVENTS ANY SPECIAL SKILLS YOU MIGHT BE ABLE TO CONTRIBUTE? ____

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MEMBER'S ACKNOWLEDGMENT OF RISK

In consideration of the services of Rochester Brooks Gun Club, Incorporated, its officers, directors, agents and employees, and all other entities associated with Rochester Brooks Gun Club, Incorporated I agree as follows:

Although Rochester Brooks Gun Club, Incorporated has taken reasonable steps to provide me with appropriate facilities and equipment and skilled personnel in order that I may participate in and enjoy an activity for which I may not be skilled, Rochester Brooks Gun Club, Incorporated hereby informs me that this activity is not without risk. Certain risks cannot be eliminated without destroying the unique character of shooting sports activities. The same elements that contribute to the unique character of this activity can be causes of loss or damage. Rochester Brooks Gun Club, Incorporated wishes me to enjoy the shooting sports activities but wants me to know in advance what to expect and be informed of the inherent risks. These risks include:

Accidental injury and/or property damage due to the use of firearms.

Accidental injury and/or property damage due to slips and falls

Accidental injury and/or property damage due to varied terrain and/or unfavorable or extreme weather conditions.

I understand that shooting sports activities may entail risks of injury or death to myself. I understand that the description of these risks is not complete and that other unknown or unanticipated risks may result in injury or death. I agree to assume responsibility for myself for the risks identified herein and for those risks not specifically identified. My participation is voluntary and I elect to participate in spite of risks.

I have read and understand Rochester Brooks Gun Club, Incorporated <u>Safety and Operating Rules</u> and the <u>Club Code of Conduct</u> which can be found under the Members Area on the website. www.rbgunclub.com

I agree that prior to participating in any shooting sports activity I must be familiar with the safe operation of any firearm that I will use and understand the safety and shooting procedures applicable to that activity. I agree that I must be physically capable of safely participating.

I assume full responsibility for myself for bodily injury, death and loss of personal property and expenses thereof as a result of those inherent risks and dangers and/or of my own negligence.

I have read, understand and accepted the terms and conditions stated herein and acknowledge that this agreement shall be effective and binding upon myself.

REMEMBER, SAFETY IS OUR FOREMOST CONCERN!					
ſ	OFFICE USE				
	Rec'd By _	Date	Amount	Cash □ Check □ Credit Card □	_

SIGNATURE _____ DATE _____