THE SAN JOSE ZOUAVES RIFLE CLUB

Membership Application - 2008-2009 Fiscal Year

Membership Type (check one): ☐ **New ($30)** ☐ **Renewal ($20)**

<<<<<<<<<<<Please complete the following information, print legibly>>>>>>>>>>>

Name: _____ *
Address: _____ *
City/Zip: _____ *
Date of Birth: _____ *
Occupation: _____
NRA Number: _____
Phone: _____ FAX: _____
Platform: PC ___, Mac ___, OTHER _____ E-Mail: _____
Armed Forces Member: ___ N/A _ _ Active ___ Reserve ___ Retired ___ Branch: _____

***Mandatory**

<<<<<<<<<<<Please complete the above information, print legibly>>>>>>>>>>>

ACKNOWLEDGMENT Of Range-Posted Safety Rules and RELEASE OF LIABILITY

I wish to apply for membership in the San Jose Zouaves Rifle Club for fiscal year 2008-2009. I certify that I have read the Range Safety Rules posted at the Santa Clara County Field Sport Park rifle ranges and this Release of Liability in its entirety. I understand each of the Range Safety Rules and the Release of Liability. I agree to comply with each of the Range Safety Rules as posted.

I hereby release, and discharge the Santa Clara County Parks Department and the San Jose Zouaves Rifle Club, it's Officers, and Members, from any liability resulting from the use of firearms and or facilities related to any and all Rifle Club activities. I hereby covenant and agree to hold the Santa Clara County and the San Jose Zouaves Rifle Club, it's Officers, and Members harmless from any liability claim or claims, demand or demands, that I now have or may in the future have for or by any reason or any cause whatsoever arising from the use of firearms and or facilities related to any and all Rifle Club activities.

I understand that club activities may be photographed from time to time and I agree to allow any photos in which I may appear to be used for non-commercial club related publications.

Signed: _____ Date: _____

OPTIONAL INFORMATION (Check all that apply.)

I am interested in helping the club by volunteering for the following projects or activities:

___ Range Development (Work party)
___ Competition and Training (interested in becoming an NRA certified instructor, and or Range Safety Officer?)
_ _ Beginning Shooter Education (Please volunteer one "second" Saturday of the month, per year)
Preferred date for volunteer junior supervision: _____
___ Publications and Information Systems
___ General Help
___ I can help contact County Supervisor:
___ Other project, specify: