34 0	MEMBER / PARTICIPANT APPLICATION
DEFENSE	Membership ID# Assigned
NAME	PHONE
ADDRESS	

DATE OF BIRTH ___/___ EMAIL _____

ARE YOU A U.S. CITIZEN? (Y/N)

HAVE YOU EVER BEEN CONVICTED OF DOMESTIC VIOLENCE OR SUBJECT TO A RESTRAINING ORDER? (Y/N)

CITY ______ STATE _____ ZIP _____

340 DEFENSE POLICY

MY MEMBERSHIP IS FOR ONE YEAR FROM THE DATE I AFFIRM BELOW. AS A MEMBER/PARTICIPANT AT 340 DEFENSE SHOOTING RANGE, I HAVE READ AND UNDERSTAND THE RULES AND REGULATIONS AND UNDERSTAND THAT FAILURE TO COMPLY WITH THESE RULES MAY RESULT IN SUSPENSION OF MEMBERSHIP WITHOUT REFUND. THERE ARE NO REFUNDS OF MEMBERSHIP FEES.

A 10% Law Enforcement/Military Discount is available and applies to range memberships only.

MY SIGNATURE BELOW, AFFIRMS MY UNDERSTANDING AND AGREEMENT TO COMPLY WITH 340 DEFENSE SHOOTING RANGE SOP AND THE COMMANDS OF ITS STAFF.

APPLICANT SIGNATU	JRE	: DATE:		
MEMBERSHIP TYPES:		(SELECT ONE OF THE FOLLOWING)		
Hourly Unlimited Family Corporate Couples / Partners MEMBER GUESTS / DAY PAS	 	\$125.00/Year + \$25.00 per hour of range time \$350.00/Year - No hourly fee associated \$730.00/Year - Three (3) Memberships - \$150.00 each additional \$1,200.00/Year - Five (5) Memberships - \$150.00 each additional \$575.00/Year - Two (2) "Unlimited" Memberships PLICANTS: <u>*Does not include use of the 300 yard range / steel target systems</u>		

STEEL UPGRADE - USE OF FACILITY STEEL TARGETS, PACKAGE EXPIRES WITH ANNUAL MEMBERSHIP *Member Annual Fee - \$25.00 * Guest/Non-Member - \$10.00 (Guest Upgrade Expires Daily)

<u>Guest</u> \$25.00 per hour - Available for use once per guest per calendar year.

Sponsoring Member ID# _____

**Must remain under the immediate supervision of the sponsoring member.

Hourly (Non-Member) \$45.00

All Memberships are subject to West Virginia Tax

MEMBER

GUEST/VISITOR

SPECTATOR

HOLD HARMLESS / RELEASE OF LIABILITY

In order to become a member and/or use the ranges at 340 Defense you must read and agree with all the terms set forth below.

I swear and/or affirm that I am of at least 18 years of age and I am legally entitled to possess and/or purchase a firearm, that I have no criminal convictions, pending criminal charges, indictments or suffer from a form of mental illness that would prohibit me from legally and safely possessing and using a firearm or would be detrimental or dangerous to me or others while utilizing the facilities of 340 Defense Shooting Range. I agree that I will never be careless and/or negligent with my firearm, I will abide by and obey all rules pertaining to being a member and/or participant of 340 Defense Shooting Range and I will abide by the commands of the Range Safety Officer(s) while utilizing the facilities of 340 Defense Shooting Range. I also 'and/or affirm that I am of good character and good moral standing. I, including any of my survivors or heirs, also agree to hold harmless and indemnity any employees or assistant of 340 Defense Shooting Range, proprietor, owner, coowner or possessor of the land and/or facilities, manager or any associates of 340 Defense Shooting Range for any harm, injury, death or property damage sustained or endured while utilizing the facilities of 340 Defense Shooting Range that occurred as a result of, but not limited to, a member's negligent or unsafe actions, personal equipment, any act of nature or any unforeseeable event, chain of events or incident.

Weapons, ammunition and any other personal equipment furnished by any member, daily shooter or guest must be safe and reliable. All guests will remain in the immediate supervision of the sponsoring member while on property.

I agree and understand that if I violate any rules, regulations or guidelines of 340 Defense Shooting Range that my privilege to use the range may be temporarily suspended or permanently revoked and that I also agree that if I have provided and false statement or information, that my membership will be immediately revoked. Permanent revocations will result in complete and total forfeiture of any paid dues of fees to 340 Defense. No refunds for permanent revocation.

PERSON TO BE CONT.	ACTED IN CASE OF EMERGENCY AND THEIR TELEPHONE CO			
EMERGENCY CONTACT:	EMERGENCY CONTACT PHONE:			
	AFFIANT INFORMATION BELOW			
MEMBER/GUEST/PARTICIPANT	'S INFORMATION - SHOULD MATCH THE INFORMATION ON	I THE FRONT SIDE OF THIS FORM		
PRINTED NAME:	DOB://	PHONE:		
SIGNATURE:		DATE:		
		DATE:		

My signature above indicates my understanding of the 340 Defense Shooting Range SOP and my agreement to adhere to all range policies and procedures.