

Winona Sportsmen's Club Membership Application

New Address? Y

(Please Print legibly)

Name _____ Phone (____) _____ H C

Mailing Address _____

City _____ State _____ Zip _____

Email _____

Are You Willing to Volunteer in a Club Function? Y N

Membership Type	Price	Check Membership Type
New Membership (Family) *	\$60.00	<input type="checkbox"/>
Annual Renewal (Family) *	\$60.00	<input type="checkbox"/>
Sr. Annual Membership (60 and over)	\$40.00	<input type="checkbox"/>
Jr. Student Membership (17 and under)	\$30.00	<input type="checkbox"/>
Life Adult Membership (Family)*	\$600.00	<input type="checkbox"/>

***Family membership include spouse and any minor children
Annual Membership is good for one calendar year**

Membership Requires Reading and Signing Below

ASSUMPTION OF RISK, RELEASE AND INDEMNITY AGREEMENT

In consideration of being allowed to shoot at the facilities of the Winona Sportsmen's Club, the above signed acknowledges that he/she understands that there are risks involved in shooting activities and that by signing above, voluntarily and expressly accepts and assumes any and all risks of property damage, injury or death resulting in any way from the above signer's use of the club's facilities either as a member or as an invited guest of the Winona Sportsmen's Club, including, but not limited to, negligence on the part of any person associated with the Winona Sportsmen's Club. The above signed further agrees to release from liability and to indemnify and hold harmless the Winona Sportsmen's Club and any of the directors, officers or agents, from any and all claims (including costs and attorney fees) that the above signed may now have or may hereafter have for property damage, personal injury or death, which the above signed may suffer or for which the signed may be liable to others arising out of or in any way connected with the above signer's shooting activities at the trap club facilities. This assumption of Risk, Release and Indemnity Agreement shall apply to all claims based upon willful or intentional misconduct. Any minor signing this form has their parents' permission.

Signed: _____

Date: _____

Official Use
Date: _____
Amount: _____
Approved by: _____
Card #: _____
Replacement or Additional Card Cost is \$10

This form should be used January 2019 – August 2019 Only