BEMIDJI AREA SHOOTERS ASSOCIATION, Inc.

PO Box 1851, Bemidji, MN 56619

www.bemidjishooters.org email: bjishooters@gmail.com ____New Member Renewal

Bemidji Area Shooters Association, Inc., hereafter known as BASA, is registered in the State of Minnesota as a 501C(7) social club and is a Range Affiliate of the National Rifle Association and the Civilian Marksmanship Program. BASA is dedicated to the encouragement and promotion of all legal, safe handgun and rifle shooting activities and is focused on the recruitment of new shooters, young and old, to these shooting sports and hunting activities. BASA provides equal opportunity for membership to all persons without regard to race, creed, religion, sex, national origin, age, disability, marital status, public assistance or sexual orientation.

Range facility usage privileges are extended to "Active Member(s)" only. "Active Member(s)" status is defined as having a paid membership fee. All others will be required to pay a user fee when the range is open for public use.

BASA is a non-profit gun club that has a long-term lease with Beltrami County. The need for volunteers to operate openrange days, various adult and youth shooting activities, Firearms Safety Training courses, facility maintenance etc. is great. We pay our expenses with membership and event fees and raffle ticket sales. Please help out when you can.

Member application Information (Please print all responses)

BASA reserves the right to determine if and/or when these membership options will change.

Applicant's Name				
First	M.I.	Last		
Permanent Address				
Street, Apt. # or PO Box#	City	State	Zip Code	
E-mail Address	Contact Ph	Contact Phone#		
 <u>Membership 7</u> Dependent children, under the age of 18 years ma Name(s) of dependent children must be <u>Annual Member Endowment Supporter:</u> (<u>Northland Reg</u>ional <u>Shooting Sports F</u>und). <u>2022 Individual Annual Membership</u> \$50.0 	listed on page two: Paren \$100 per year (\$50 for B Please include separate	be under direct paren at or Guardian Additio ASA membership an checks, one for BAS.	nal Agreement. d a \$50 donation to the	
*Please provide first and last name of additional fa	A "Family dependent	" member is defined beyond 18 years of a	as a spouse and/or a age.	
 Life Member: \$600.00 O Life Member at \$600.00 one-time payment per member \$150.00 per quarter for one year per member 	plus \$300.00 for each a	dditional family mer	nber	
After selecting your membership option from the application and mail, along with your check or n			ooth pages of your , Bemidji, MN 56619	
 I have read and agree to follow BASA Rate I agree to Use <i>and provide</i> Eye and Ear Pr I certify that I am 18 years of age or older, the safety guidelines of and participate in range I certify that I am not a member of any organ the United States by force or violence. 	rotection for ALL gues hat I am legally eligible safety program(s) of BA	ts or family member to possess firearms, a SA when the program	rs that accompany me. Ind that I shall obey all the m is offered.	
Signature	Date			

Page 2 of 2

RELEASE, INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

In consideration of participating in gun club activities, and for other good and valuable considerations, I hereby agree to release and discharge from liability arising from negligence <u>Bemidji Area Shooters Association, Inc.</u> and it's directors, officers, employees, agents, volunteers, participants and all other persons or entities acting for them (hereafter collectively referred to as "Releasees"), on behalf of myself and my children, parents, heirs, assigns, personal representative and estate, and also agree as follows:

1. I acknowledge that gun club activities involve known and unanticipated risks which could result in physical or emotional injury, paralysis or permanent disability, death and property damage. Risks include, but are not limited to, death or serious injury as a result of being shot or as a result of equipment malfunction: hearing loss; loss of vision; broken bones, bruises, and other bodily injuries caused by falls; medical conditions resulting from physical activity, and damaged clothing or other property. I understand such simply cannot be eliminated, despite the use of safety equipment, without jeopardizing the essential qualities of the activity.

2. I expressly accept and assume all of the risks inherent in this activity or that might have been caused by the negligence of the Releasees. My participation in this activity is purely voluntary and I elect to participate despite the risks. In addition, if at any time I believe that event conditions are unsafe or that I am unable to participate due to physical or medical conditions, then I will immediately discontinue participation.

3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless Releasees from any and all claims, demands, or causes of action which are in any way connected with my participation in this activity, or my use of their equipment or facilities, arising from negligence. This release does not apply to claims arising from intentional conduct. Should Releasees or anyone acting on their behalf be required to incur attorney's fees and costs to enforce this agreement. I agree to indemnify and hold them harmless for all such fees and costs.

4. I represent that I have adequate insurance to cover any injury or damage I may suffer or cause while participating in this activity, or else I agree to bear the costs of such injury or damage myself. I further represent that I have no medical or physical condition which could interfere with my safety in this activity, or else I am willing to assume and bear the costs of all risks that may be created, directly or indirectly, by any such condition.

5. In the event that I file a lawsuit, I agree to do so solely in the state where Releasees' facility is located, and I further agree that the substantive law of that state shall apply.

6. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

PARENT OR GUARDIAN ADDITIONAL AGREEMENT (Must be completed for participants under the age of 18)

In consideration of _______(PRINT minor's names) being permitted to participate in this activity, I further agree to indemnify and hold harmless Releasees from any claims alleging negligence which are brought by or on behalf of minor or are in any way connected with such participation by minor.

By signing this document, I agree that if I am hurt or my property is damaged during my participation in this activity, then I may be found by a court of law to have waived my right to maintain a lawsuit against parties being released on the basis of any claim for negligence.

I have had sufficient time to read this entire document and, should I choose to do so, consult with legal counsel prior to signing. Also, I understand that this activity might not be made available to me or that the cost to engage in this activity would be significantly greater if I were to choose not to sign this release, and that the opportunity to participate at the stated cost in return for the execution of this release is a reasonable bargain.

I have read and understand this document and I agree to be bound by its terms.

SIGNATURE

PRINT NAME