

Lone Tree Archers Annual Membership Form - 2019

Name: _____

Address: _____

City, state, zip code: _____

Today's date: _____ Telephone: _____

Email address: _____

(Email is our primary method of communicating with club members. Your email address will not be shared with others.)

Type of Membership

Individual _____ \$35

Family _____ \$50
(You + spouse + children under 18)

Please fill out the form completely and sign the waiver below.

Make checks payable to **Lone Tree Archers**. Mail completed form and payment to:

Lone Tree Archers, PO Box 1385, Sidney, MT 59270



You must be a current paid member in order to participate in any archery shooting activity on the Lone Tree Archers' range. After we receive this completed form and your payment, you will be contacted by email or phone and given the lock combination to the archery range gate so you can access the range. Membership period is for the calendar year from January through December.

Should you have any questions, please contact Tom at (406) 489-1946 or Nancy at (406) 488-5128 or send email to lonetreearchersclub@gmail.com

Visit our website at www.lonetreearchers.com for more information.

Waiver, Consent, and Release:

In consideration of being allowed to participate in the activities of the Lone Tree Archers club, I hereby waive any right of recovery for any injury incurred by myself and my child or children (if accompanied by a child or children), and to my property during any activity or shoot held by the Lone Tree Archers club, whether self-inflicted or inflicted by others and whether or not the acts of others were intentional or negligent. In no case shall I hold any of the Lone Tree Archers officers, board members, or other club members responsible for the acts of third persons who may injure myself, my child or children, or my property. I execute this waiver, consent and release on my own behalf and on behalf of my child or children, if they are accompanying me, realizing that this sport is not hazard-free and fully assuming those risks of all conditions in and about the activity area. I also waive any and all specific notice of the existence of any hazards.

Signature: _____ Date: _____