



# THE TEXICAN RANGERS



## WAIVER/MEMBERSHIP APPLICATION OR RENEWAL

Texican Rangers; PO Box 782261; San Antonio, TX 78278-2261

Alias: \_\_\_\_\_ SASS Number: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Email Address: \_\_\_\_\_ Birth Date: \_\_\_\_\_ ROI:  ROII:  WBRO:

Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_

### ANNUAL DUES

Individual Membership - \$36

Family Membership - \$48

Check # \_\_\_\_\_

Cash \_\_\_\_\_

Date \_\_\_\_\_

Amount Paid: \_\_\_\_\_

### EMERGENCY CONTACT: In the event of an emergency on the range, who should we contact?

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

### GENERAL RELEASE FROM LIABILITY, WE REQUIRE ALL SHOOTERS TO ASSUME ALL RISK BY SIGNING THIS RELEASE.

Voluntary participation by guests may involve observing, handling, and firing various firearms of the type(s) used during the period from 1836 through 1900. A guest may participate in handling and loading live ammunition into such firearms. During a match the firearms are fired, using lead bullets, at steel targets. ALL PARTICIPANTS ARE REQUIRED TO ASSUME ALL RISK BY SIGNING THIS GENERAL RELEASE FROM LIABILITY.

An inherent risk of exposure to COVID-19 and other infectious disease exists in any public place where people are present. COVID-19 is a contagious disease that can lead to severe illness and death. By signing this waiver, the individual understands and assumes all risks related to exposure to any infectious disease, including COVID-19

I, the undersigned, will abide by the safety rules of SASS and the TEXICAN RANGERS, INC (hereafter referred to as TR) including the Club Rules while on Stielers Ranch. I recognize the inherent dangers of injury and/or death associated with Cowboy Action Shooting and will not handle or discharge firearm(s) in a manner that may be unsafe to others or me. I understand that the range is a "cold" range and that my firearms must be unloaded at all times unless I am on the firing line and under the supervision of a range officer. I am aware of the potentially injurious noise level associated with the discharge of firearms and the possibility of being struck by rebounding bullet particles. I will always wear eye protection both on and off the firing line, and insist that my guest(s) do likewise. I understand that ear protection is also recommended. I grant TR the right to use photographs of me participating in TR events or at the Stielers Ranch for any lawful purpose, including without limitation, printed and electronic content.

I, the undersigned, do hereby release and discharge (1) the TR and their representatives, agents, servants, directors, and employees, (2) Becky Patterson, her children, heirs and successors, (3) the Stielers Ranch, its owners and their successors, and (4) any and all operating facilities associated with the TR or the Stielers Ranch, from any and all liability of every kind and character, howsoever arising, including bodily injuries and loss or damage of property, sustained by me, my guest, and any other person or entity, having or asserting claims or rights, by, through, or under me; and I do covenant and agree to HOLD HARMLESS AND INDEMNIFY the said entities and persons from any claims of the nature released or discharged, arising by, through, or under me INCLUDING, WITHOUT LIMITATION, ANY CLAIMS ARISING OR ALLEGED TO ARISE FROM THE SOLE NEGLIGENCE OF ANY SUCH INDEMNITEE. I AM SIGNING THIS DOCUMENT FOR THE PURPOSE AND CONSIDERATION EXPRESSED AS MY FREE ACT AND DEED.

**This is a legal and binding obligation from date of signature to 31 December 2021, inclusive.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent or Guardian: \_\_\_\_\_ Date: \_\_\_\_\_