



Pelham Fish and Game Club, Inc.

c/o Membership Secretary
PO Box 917, Pelham, New Hampshire 03076
(603) 635-8311 www.pelhamfishandgame.org

MEMBERSHIP FORM – Please complete all pages

CHECK ONE: Application for Membership Update Information Only (current members)

APPLICANT INFORMATION

Applicant's Name: _____ PF&G # (update): _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone#: _____ Date of Birth: _____

Email Address: _____ Occupation: _____

Vehicle Description: _____ License Plate #: _____

NRA Membership #: _____ Are you a member of GONH / GOAL ? _____

Other Sporting Club Affiliations: _____

Have you been convicted of a felony? No / Yes

Have you been suspended, expelled, or asked to give up your membership in any way by another Sporting Club? No / Yes

EMERGENCY CONTACT INFORMATION

In case of emergency, notify: _____

Emergency Telephone#: _____ Relationship: _____

SPONSOR RECOMMENDATION

(For new applicants only. To be completed by Sponsor.)

1. Please describe your relationship with Applicant (including duration):

2. In your opinion, can the Applicant be trusted to SAFELY use firearms on the Club's property? **Yes / No**

3. Please provide any additional information that you feel will help the board approve this application:

4. As a member in good standing of Pelham Fish and Game I hereby support this application for membership and swear that I know of no reason to withhold membership from the Applicant.

Printed Name: _____ Member Number: _____

Signature: _____ Date: _____



Pelham Fish and Game Club, Inc.

c/o Membership Secretary

PO Box 917, Pelham, New Hampshire 03076

(603) 635-8311 www.pelhamfishandgame.org

MEMBERSHIP FORM – Please complete all pages

REPRESENTATIONS BY APPLICANT

As a condition for applying for membership in Pelham Fish and Game Club, Inc. I:

1. CERTIFY that I am a person of good repute living within the United States of America; that I am not a member of any organization or group having as its purpose or one of its purposes the overthrow by force the government of United States of America or any of its political subdivisions; that I am not prohibited by New Hampshire law from owning or possessing a firearm; and that if admitted to membership, I will fulfill the obligations and purposes of PF&G, of good sportsmanship and good citizenship, and to promote the advancement and safety of the shooting sports as outlined in Articles 2.1 and these bylaws. I also certify that a copy of these Bylaws has been made available to me;
2. CERTIFY that I am not a member of any gun control organization and believe strongly in the rights of individuals to bear arms as defined by the 2nd Amendment of the US Constitution;
3. CERTIFY that I have never been convicted of a crime of violence;
4. AGREE to be bound by the by-laws of Pelham Fish and Game Club, Inc. along with any directives and safety rules approved by the Board of Directors of Pelham Fish and Game Club, Inc.;
5. UNDERSTAND that I will not be granted membership until the Board of Directors has reviewed and approved my membership application and I have attended a safety orientation; and
6. UNDERSTAND that such review may, but not necessarily, include a background check.

Printed Name: _____

Signature: _____ Date: _____

Applicants, be sure to also complete the Pelham Fish and Game Club, Inc. liability release form. If a copy is not attached to this application, go online at www.pelhamfishandgame.org or request one by email at Membership@pelhamfishandgame.org or phone or write to the address at the top of this form. Copies of this and other forms are available in person at the club office or at scheduled events.

Office use only)						
Amt recv: _____	Check# _____	Membership#: _____				
Type: Regular	Associate	Junior	Senior	Student	Other: _____	

LIABILITY RELEASE, INDEMNIFICATION, § ASSUMPTION OF RISK

in consideration for being allowed on the premises or to participate in activities at

PELHAM FISH and GAME CLUB, INC. ("PFG"), a nonprofit corporation

(Must be completed by all individuals prior to shooting or upon entry of **PFG property** by any person)

1. In consideration of being allowed on the premises of **PFG** or to participate in any activities at **PFG** I hereby voluntarily agree to assume any and all risks associated with shooting at **PFG**. **I understand the risks and hazards involved. Shooting may be considered a dangerous activity, with the risk of potentially life threatening injuries, and potential exposure to lead and airborne lead particles. I assume the risk of any and all injuries I may suffer due to the physical condition of PFG, the negligence of PFG, equipment failures, defective equipment, acts of God, the acts or omissions of shooters or others who may be at, on, or near, PFG, whether with or without permission of PFG. I agree to indemnify and hold PFG harmless for any injuries.** I hereby consent to receive medical treatment and be responsible for the payment of same, which may be deemed advisable in the event of injury, accident and/or illness during the activities at **PFG**.

2. I understand there will be other persons shooting, and/or carrying firearms at **PFG** and I agree to act prudently and carefully to avoid causing them any injury. I certify that I am or will be familiar with the safe use and operation of any firearms I may use while at **PFG**. I have read and I am familiar with the rules of shooting and firearm safety, as well as the specific shooting range rules of **PFG** (copies available). On behalf of myself, my estate, my heirs, and assigns, I hereby release **PFG**, their employees, agents, representatives, assigns, members, instructors and volunteers from any and all liability regardless of cause, including injuries due to negligence, up to and including death, or property damage or theft I may suffer because of my presence and participation in activities at **PFG**, which may be caused by my own or others' negligence. I specifically release **PFG** for myself, my heirs and assigns from liability for any personal injury, death, disability, and acts and/or omissions of whatsoever kind and nature including, but not limited to, those caused by negligence including, *but not limited to, those acts and/or omissions of other participants or persons at the PFG shooting range(s).*

3. I understand that both commercial and non commercial still, audio/video and/or motion picture photography may occur during my presence on **PFG** property and as long as I am in the general area, I may be incidentally included in such photography. Should I wish to be excluded from such photography, I understand that it is my responsibility to be aware of photographic activity and remove myself from the area or event being photographed or recorded. Absent such action on my part, I hereby grant **PFG**, its agents, volunteers, sponsors, beneficiaries, heirs and assigns the right to use my photographic image and video recording(s) in the promotion of the shooting sports or **PFG** in general as it chooses in its sole discretion without compensation.

4. If any portion of this release is found to be invalid, the offending portion shall be stricken and the remainder shall remain in full force and effect. I hereby agree that jurisdiction for any action pertaining to this RELEASE shall lie exclusively in Hillsborough County, State of New Hampshire and shall be governed exclusively by the laws of the State of New Hampshire without reference to conflict of laws provisions.

5. I hereby certify that I am not prohibited from possessing, selling, owning or transferring firearms under State or federal law: I (A) have not been convicted of a felony that has not been annulled or expunged; or (B) Have not been convicted of a violation of 18 USC § 922 that has not been annulled or expunged; and (C) Am not a member of an organization that advocates the violent overthrow of the United States Government and that I am not barred by any law from the possession, use, or control of firearms.

I Have Read the Above Document, and Understand and Agree to its Contents

Name (please print) ***

Signature

Date

Address

City State Zip Code

(____)_____
Phone Number

Name of Minor Minor **must** have parent or legal guardian signature

WITNESS

***I hereby swear or affirm that I am the lawful guardian of the above listed minor, and have the lawful authority to sign this RELEASE on his/her behalf.