

IDAHO AUTOMATIC WEAPONS COLLECTORS ASSOCIATION

P.O. Box 7741 Boise, Idaho 83707-1741

Members _____ NonMembers _____

SHOOTING EVENT REGISTRATION

EVENT: _____ WEAPON(S): _____

Registrant's Name _____

Address _____

City _____ State _____ Zip _____

Phone (____) _____ Email (to receive match results) _____

Safety Rules

- The use of hearing and eye protection is mandatory for all persons on the firing line.
- No firearms shall contain ammunition and no feed strips, clips, magazines or ammunition belts shall be loaded into firearms anywhere on the range except on the firing line and under the supervision of the range safety officer(s).
- No firearms shall be loaded and no magazines, feed strips, clips or ammunition belts shall be inserted into firearms until instructed to do so by the range safety officers).
- No firearms on the firing line will be handled by anyone while any personnel are down range.
- Muzzles of firearms shall be pointed DOWN RANGE at all times.
- Any person in attendance at this event shall call a CEASE-FIRE if an unsafe condition is observed.

Release of Liability

I have read the above safety rules applicable to my participating in this shooting event and I understand and agree to follow them.

I acknowledge that I assume full responsibility for my safety. I further understand that I participate and/ or attend at/ in this event at my own risk. I agree to hold Idaho Automatic Weapons Collectors' Association, Inc. (IAWCA), its officers, members and employees harmless from any and all claims which may arise from any injury, damage or loss which might occur from participation and/ or attendance at or in these activities. This release and hold harmless is on behalf of myself, my heirs, representatives and dependents. I further understand that the IAWCA makes no representations, warranty or guarantee regarding the condition or quality of the facilities or equipment utilized at or furnished for this event.

I HAVE READ AND AGREE TO THE ABOVE TERMS

I further declare that I am over the age of 18 and that I am not legally prohibited or restricted from possessing, handling, or shooting firearms.

Signature: _____ Date: _____

