

2010 Membership Renewal and Waiver Application

North Lawrence Fish and Game Club, Inc.

This is a release of legal rights. Read and understand it before signing.

North Lawrence Fish and Game Club, Inc. References to the North Lawrence Fish and Game Club, Inc. include its principal owners and shareholders, all of its officers, officials, employees, agents, and assigns.

I, _____, freely choose to participate in

Member print your name card #
activities of Firearm Sports, Fishing and/or other outdoor recreation on the premises of the North Lawrence Fish and Game Club, Inc. As a result of the inherent risks in these activities, I know I may suffer injury to my person or property. If any of these occur, I understand that I cannot make a claim, sue or expect North Lawrence Fish and Game Club, Inc. its owner's, officers, agents, employees, and associates (hereinafter referred to as RELEASEES) to be legally responsible or pay for any damages, and I expressly release, discharge and waive any claims I may have against the foregoing persons and entities.

Risk of Activities: I, the undersigned, hereby acknowledge that I have voluntarily chosen to partake in the activity (as described above) with RELEASEES and on RELEASEES' property. Certain risks are inherent in any recreational activity and cannot be eliminated, altered, or controlled and these risks that contribute to the unique character of the activity can also be the cause of injury, illness, death, and damages. I know and fully understand that the discharge of weapons such as cross-bows, compound and re-curve bows as well as firearms of all kinds, involves risk. I acknowledge that it is my responsibility to take the necessary precautions customarily associated with the aforementioned, such as the wearing of appropriate hearing and eye protection to prevent unnecessary damage to my vision and hearing.

I understand and acknowledge that the above list is not complete or exhaustive and that other risks, known or unknown, anticipated or unanticipated, may also exist and result in injury, illness, disease, death or damage. My participation in this activity is purely voluntary and I elect to do so at my own risk.

I further agree that I am solely responsible for my own equipment, supplies, personal property, and effects during the course of these activities...

Health and Safety: I have been advised to consult with a medical doctor with regard to my personal medical needs. I state that there are no health-related reasons or problems that preclude or restrict my participation in this activity.

Release: In consideration for RELEASEES allowing me to partake in the above mentioned activity, I voluntarily agree to release, discharge, and hold harmless RELEASEES for any and all claims of liability arising out of their negligence, fault, recklessness, or any other act or omission which causes the undersigned illness, injury, disease, death and damages of any nature in anyway connected with my participation in any club activities.. I also expressly agree to release and discharge RELEASEES from any act or omission of negligence in rendering or failing to render any type of rescue emergency or medical services. In signing this document, I fully recognize and understand that if I (or any minor on whose behalf I am signing this release) am injured, die or my property is damaged, I am giving up my right to make a claim or file a lawsuit against RELEASEES, even if they negligently or by some act of omission cause injury or damage. I agree to hold harmless, defend, and indemnify RELEASEES from all defense costs, including attorney's fees incurred in connection with claims for bodily injury, wrongful death, or property damage sustained by any person or persons who claims that I have caused said injury, death or property damage.

As a parent or legal guardian of a participant under 18 years of age, I have read and voluntarily agree that said minor may participate in club activities, and I sign this release on their behalf and on the behalf of the minor's parents and/or legal guardians. In addition, I give RELEASEES permission to treat said minor in case of illness, injury, emergency, or accident. Should emergency medical services become necessary for

the undersigned participant or minor, the expenses are the sole responsibility of the participant and not that of RELEASEES. Personal medical and travel insurance is strongly advised for all participants.

RELEASEES reserve the right to accept or deny service to any person. I hereby agree to follow all rules, regulations, and instructions of RELEASEES while participating in this activity. I also certify that I and any minor on whose behalf I am signing are physically and mentally capable of participating in these activities. I hereby represent that I have in-formed RELEASEES of any pertinent medical conditions that may affect my or minor's participation. I hereby agree that RELEASEES may use film or photographic records of this activity and my participation in it for its promotional and/or commercial purposes.

Term/Duration: The term of this release shall be in full force for duration of not less than one (1) year from the date of the signature below and shall renew automatically each year thereafter.

The Venue of any dispute that may rise out of this agreement or otherwise between the parties is Stark County, Ohio.

Signature: I indicate by my signature below that I have read the terms and conditions of participation and agree to abide by them. I have carefully read this Release Form and acknowledge that I understand it. No representation, statements, or inducements, oral or written, apart from the foregoing written statement, have been made. The Release Form shall be governed by the laws of the State of Ohio. If any portion of this Release Form is held invalid, the rest of the document shall continue in full force and effect.

2009 Card Number _____ NRA Member (circle) Yes No

Print Name _____ Spouse's First Name if card is desired _____

Address _____ City _____ State _____ Zip _____ - _____

Phone (____) _____ - _____ Email _____ @ _____ Occupation _____

Main Club Interests Circle All Lake Range Trap Sporting Clays Archery or Other _____

I have read and will comply with the Range Rules and this renewal application will be on file at the club.

Membership Year is January 1 to December 31 of 2010

Regular Yearly Fee \$50.00 Renewal after March 31 is \$ 70.00

Senior Yearly Fee \$25.00 Renewal after March 31 is \$ 45.00

Senior's must be 62 as of January 1,2010

Senior Birth Date _____

MEMBER _____ Date _____,2010

Member signature

SPOUSE _____ Date _____,2010

If applicable

Please remit payment to North Lawrence Fish and Game Club PO Box 41 North Lawrence, Ohio 44666-0041

Amount Paid _____ .00 Cash _____ Check # _____

If you wish to have your Membership card mailed to you please include a stamped self addressed envelope or pick it up at a membership meeting starting February.