



## Membership Application and Agreement

SEND COMPLETED APPLICATION TO [INFO@COWTOWNRANGE.COM](mailto:INFO@COWTOWNRANGE.COM)

Please include a copy of your state issued ID, CCW Permit, and First Responder/Military ID

Choose Membership Type			
Individual	Couple	Family	Group
<input type="checkbox"/> \$420/year	<input type="checkbox"/> \$720 per couple	<input type="checkbox"/> \$960/year (up to 4)	<input type="checkbox"/> \$350/per member (4 min.)
<b>First Responder/Military Discount (For Individual Memberships Only):</b> <input type="checkbox"/> 25% for active duty, active reserve, and retired personnel with valid ID. <input type="checkbox"/> 15% for all other prior service personnel (with honorable service); must provide proof of service (DD-214, Police Commission Card, Fire Chief Letter)			<input type="checkbox"/> \$99 Range Safety Course (Required for ALL members) <b>Discounts:</b> 1) Individual FR/Mil = \$50; 2) Couple, Family and Group = \$50/person.
<b>Member Information (please print clearly)</b>			
Last:		First:	Middle:
Street Address: _____			
City: _____ State: _____ Zip Code: _____			
Phone(s)	Cell:	Work:	Home:
Email Address:			Date of Birth:
Emergency Contact Name & Phone: _____			

Membership to Cowtown Range will be available only to those persons who are legally able to own and possess a firearm and are at least 21 years of age. Applicants must be in compliance with all federal, state, and local laws concerning the handling and ownership of firearms. Applicants must lawfully possess a valid government issued photo ID.

Memberships will be granted and may be revoked at the sole discretion of Cowtown.

Professional Firearms Training (Civilian, Law Enforcement, and/or Military): \_\_\_\_\_ Yes \_\_\_\_\_ No  
 Firearms Experience Level: \_\_\_\_\_ Beginner \_\_\_\_\_ Intermediate \_\_\_\_\_ Advanced

**I certify that (1) I am not and have never been the subject of a criminal proceeding or any other proceeding that prevents me from legally owning, handling, or possessing firearms under Arizona or Federal Law; (2) that I can lawfully own, handle, and possess a firearm; (3) that all information given in this application is true and correct to the best of my knowledge.**

I have downloaded, read, signed and agree to comply with the Cowtown Range Operations Manual. I have also read and signed the Waiver of Liability, Release, Hold Harmless, and Indemnification Agreement attached to this application.

<b>FOR OFFICE USE ONLY</b>	Member Number: _____
<input type="checkbox"/> Copy of valid government issued photo ID <input type="checkbox"/> Cowtown Range Operations Manual/Rules downloaded/signed <input type="checkbox"/> Waiver of Liability Release Hold Harmless and Indemnification Agreement signed <input type="checkbox"/> Range Safety Course completed/fee received Printed Name of Authorized Cowtown Range Agent: _____	



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## The Membership Program – Benefits

- ✓ Cowtown Range Membership Photo ID card
- ✓ Priority access to designated “member” range bays and platforms
- ✓ Range Bays and Platforms: 2-hour daily use (subject to availability) at no charge; up To 4 hours use at \$15/hour beyond first 2 hours
- ✓ Convenient On-Line scheduling from your phone or desktop
- ✓ 10% discounts for all Cowtown shooting competitions
- ✓ 10% discount on all steel target rentals
- ✓ 10% discount on all storage rental fees
- ✓ 10% discount on all Cowtown Workshops
- ✓ 10% off Cowtown Paintball admission (up to 3 additional guests included)
- ✓ FREE admission to member only days

## Range Safety Course (\$99 one-time fee – discounts may apply)

- Mandatory 2-hour Range Safety Course
- Completion of the Range Safety Course is required prior to the 1<sup>st</sup> use of the range and being granted access to online scheduling tool.

## The Fine Print

- *Membership fees are non-refundable upon payment*
- *A **Range Safety Course** is required and adds a one-time fee added to your annual membership. If significant changes are made to the security and safety plan, you will need to re-attend a RSO course. There will be no charge for this additional course.*
- ***Family memberships**: Up to 4 persons and must consist of at least one parent/guardian plus the parent/guardian’s children, siblings, or parents. Up to two additional family members may also be joined at a cost of \$225 per person.*
- ***Group Memberships**: Minimum 4 persons; renewals limited to the original group, or Non-Members.*
- *You must be at least 21 years old to purchase a membership. Shooters 12 – 20 years old may be “members” under a family membership, but are required to be accompanied by a member parent or guardian over the age of 21 when using the range.*
- ***Guest Policy** – members are allowed 2 guests per month at no cost – additional guests will be assessed a fee of \$25/person per day. No more than 4 guests are allowed each day. A waiver form must be delivered to Cowtown for each guest. Guests 12 – 20 years of age must be accompanied by a parent or guardian.*
- *Members may schedule parties or events that exceed the guest limits by calling range Management, but such events are subject to Cowtown’s event pricing schedule.*
- *Cowtown reserves the right to revoke a membership for a material violation(s) of Cowtown rules, policies, and protocols, or any federal, state, or local law.*
- *Members must reimburse Cowtown for damage caused to the range.*
- *Memberships cannot be sold, assigned, leased, licensed, or otherwise transferred in any way.*



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- *Members may be required to share bays/platforms as follows: Up to four members per bay, up to two members per platform*
- **Members must provide 24 hours notice for all range cancellations or else a \$15/hour charge will be imposed.**
- ***INSTRUCTING OR CHARGING FEES TO ANYONE WHO MAY BE UTILIZING RANGE SPACE WITH YOU, WITHOUT BEING AN AUTHORIZED COMMERCIAL USER, WILL RESULT IN PERMANENT REMOVAL FROM COWTOWN RANGE.***



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### WAIVER OF LIABILITY RELEASE HOLD HARMLESS AND INDEMNIFICATION AGREEMENT

I, the undersigned, wish to engage in firearms shooting and/or firearms training at Cowtown Range, located at 10402 West Old Carefree Hwy Peoria, AZ 85383

I understand that engaging in these activities may be hazardous, with accompanying risks of personal injury, death, and/or loss or damage to my property. In consideration of my participation in such shooting activities, I, on my own behalf and that of my heirs, successors, representatives, administrators and assigns, hereby:

Waive and completely release any and all, past, present or future claims, causes of action, suits, rights, damages, costs, expenses or obligations or demands of any kind whatsoever, I, or anyone on my behalf might have against Westward Ho Adventures, LLC, Cowtown Range, LLC, their parent, affiliates, subsidiaries or successor and their respective officers, directors, servants, employees, agents, representatives and contractors (together "Cowtown Range"), for any loss, damage, personal injury, death and/or loss or damage to my property resulting from my participation in such shooting activities;

Agree to indemnify, defend and hold harmless Cowtown Range, from any and all claims by any person, firm, corporation or others, for any damages, loss or claims, of any nature, arising in any way out of my participation in such shooting activities; and

Assume all risks associated with such activities and all responsibility for medical expenses, costs and/or other obligations and other losses or injuries to me or in which I may become involved, by reason of my participation in such shooting activities at the aforementioned facility or event.

#### MY COMMITMENT TO SAFE GUN HANDLING

Anyone who uses a firearm has a responsibility to themselves and others to use the firearm safely. I acknowledge that I am familiar with the basic rules of firearm safety and that those basic rules have been explained to me. I agree to follow all of the basic rules of firearm safety at all times during my use and handling of any firearms. The safe use of firearms dictates that I understand and agree to follow all of these instructions:

- I WILL TREAT EVERY FIREARM AS IF IT WERE LOADED.
- I WILL ALWAYS KEEP THE FIREARM POINTED IN A SAFE DIRECTION.
- I WILL NOT PLACE MY FINGER ON THE TRIGGER OR IN THE TRIGGER GUARD UNLESS AND UNTIL I AM READY TO FIRE.
- I WILL ALWAYS BE AWARE OF MY TARGET AND WHAT IS BEYOND IT AND AROUND IT.
- I WILL ALWAYS WEAR APPROPRIATE EYE AND EAR PROTECTION.
- I WILL ALWAYS BE IN CONTROL OF MY FIREARMS.
- I WILL NOT INSTRUCT OR CHARGE FEES TO ANYONE WHO MAY BE UTILIZING RANGE SPACE WITH ME UNLESS I OR MY COMPANY IS AN AUTHORIZED COMMERCIAL USER OF COWTOWN RANGE.

I understand these basic rules of firearms safety and I agree to follow them at all times. I further certify that I am over eighteen [18] years of age and have read and understand this Waiver of Liability, Release, Hold Harmless and Indemnification Agreement and have executed this instrument voluntarily on this date; and that I am a legal United States citizen, and am not a prohibited possessor of firearms. I also agree to allow Cowtown Range and their vendors/associates to use photos or videos of me for marketing and promotional purposes, without any identifying information (Initial here if you do not permit this: (\_\_\_\_\_)).

\_\_\_\_\_  
Printed Name Date

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



## Automatic Payment of Annual Membership Dues by Credit Card

- **Automatic Bill Payments**  
Your annual membership dues are paid automatically from your designated credit card. You don't have to write checks!
- **Time & Money Savings**  
You save the time spent writing and mailing checks plus the cost of stamps, checks, and envelopes.
- **Reliable**  
Your membership fees are paid on time, every time. You never have to worry about forgetting a payment, or mailing it on time.
- **Safe**  
Automatic payments are extremely accurate and there are no checks to be lost, stolen, or delayed in the mail.

### Authorization for Automatic Payment by Credit Card

I authorize Cowtown Range to make a one-time credit card charge described below:

Type of Credit Card:  Visa  MasterCard  Discover  American Express

Credit Card Account Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security Number: \_\_\_\_\_ Annual Amount: \$ \_\_\_\_\_ RSC Fee: \$ \_\_\_\_\_

Name as it appears on credit card: \_\_\_\_\_

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

\* **Note:** The Security Number on a Visa or MasterCard is generally a 3-digit number that follows the last four digits of the account number and can be found on the back of the card. The Security Number on an American Express card is generally a 4-digit number located on the front of the card above the last digits of the account number.

I understand and agree that Cowtown will charge my credit card account annually on the anniversary of the commencement of this membership agreement. If the credit card does not successfully charge on the payment day, Cowtown will attempt to charge the card again in 5 business days. If the second attempt also fails, membership will be suspended until a valid credit card is given to resume monthly charges.

I hereby authorize Cowtown to maintain my signature on file and to charge my credit card on an annual basis as directed. This authorization will remain in full force and effect as long as I hold a membership in Cowtown or until I provide Cowtown written notification of its termination. I agree to provide Cowtown with accurate and complete billing information including legal name, address, telephone number, and credit card billing information. I further agree to notify Cowtown of any credit card changes 1 full calendar month prior to the next scheduled payment date. All written instructions must be delivered to Cowtown by mail or fax and must be signed by me. I understand and agree that failed charges to my credit card account may subject me to an additional administrative fee of \$20 per failed charge. I may pay this fee by cash or money order prior to my next scheduled payment date.

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



**Additional Member Info**

<b>Member Information (please print clearly)</b>			
Last:		First:	Middle:
Address: City: _____ State: _____			
Phone(s)	Cell:	Work:	Home:
Email Address:			Date of Birth:
Emergency Contact Name & Phone:		Family Relationship (wife, son, etc)	
Professional Firearms Training (civilian, law enforcement, and/or military?) YES                  NO		Firearms Experience Level: Beginner                  Intermediate Advanced	
<b>Member Information (please print clearly)</b>			
Last:		First:	Middle:
Address: City: _____ State: _____			
Phone(s)	Cell:	Work:	Home:
Email Address:			Date of Birth:
Emergency Contact Name & Phone:		Family Relationship (wife, son, etc)	
Professional Firearms Training (civilian, law enforcement, and/or military?) YES                  NO		Firearms Experience Level: Beginner                  Intermediate Advanced	
<b>Member Information (please print clearly)</b>			
Last:		First:	Middle:
Address: City: _____ State: _____			
Phone(s)	Cell:	Work:	Home:
Email Address:			Date of Birth:
Emergency Contact Name & Phone:		Family Relationship (wife, son, etc)	
Professional Firearms Training (civilian, law enforcement, and/or military?) YES                  NO		Firearms Experience Level: Beginner                  Intermediate Advanced	