



REGISTRATION AND RELEASE OF LIABILITY

*** Fax or Phone in Registration to reserve your spot now: (209) 274-4707 ***

*** Participants must Mail a \$50 Non-Refundable deposit within 5 business days from registration to keep their reservation ***

Today's date:	To secure your reservation mail your Non-refundable deposit along with a copy of this registration to: Rendezvous Primitive Arms, P.O. Box 1140, Ione' Ca 95640				
PARTICIPANT INFORMATION					
Last name:	First:	Middle:	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs.	DOB:	Sex: <input type="checkbox"/> M <input type="checkbox"/> F
Street address (no PO Box)					Contact Number: ()
City:	State:	ZIP Code:		California Drivers License:	

COURSE INFORMATION		
Course Name:	Course date:	If range qualifying, type and caliber to be used:
Why are you taking this course? What do you hope to achieve?:		

IN CASE OF EMERGENCY			
Name of local friend or relative (not living at same address):	Relationship to patient:	Home phone no.: ()	Work phone no.: ()

DECLARATION AND RELEASE OF LIABILITY	
<p>I declare under penalty of perjury that all statements made by me in this application are true and correct. I declare that I have read the specific legal requirements and prohibited offenses pertain to firearm ownership and I am declaring by affixing my signature that nothing would preclude me from possession of a firearm.</p> <ol style="list-style-type: none"> 1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular skills, equipment and personal discipline may reduce the risk, the risk of serious injury does exist; and, 2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibilities for my participation; and 3. I, for myself, and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS RENDEZVOUS PRIMITIVE ARMS, Inc. its officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and owners and lessors of premises used for the activity (Releasees), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law. <p>I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGN IT FREELY AND VOLUNTARILY WITHOUT INDUCEMENT.</p>	
<i>Participant's signature</i> <hr style="border: 0; border-top: 1px solid black;"/>	<i>Date</i> <hr style="border: 0; border-top: 1px solid black;"/>
<i>Patient/Guardian signature if participant is under 18</i> <hr style="border: 0; border-top: 1px solid black;"/>	<i>Date</i> <hr style="border: 0; border-top: 1px solid black;"/>