DELRAN JUNIOR MARKSMAN CLUB, INC.

PO Box 1134, Delran, New Jersey 08075-0934

NRA J1349 **www.delranjuniormarksman.com** **CMP 15044**

JUNIOR MEMBERSHIP APPLICATION

Membership Year 20____ ☐ New ☐ Renewal Member # _____

NAME_____ TEL#_____
(Last) (First) (Middle)

HOME ADDRESS_____
(Number & Street) (City & State) (Zip)

SEX_____ AGE_____ DATE OF BIRTH_____

E-MAIL ADDRESS_____

I certify that I am a citizen of good repute of the United States of America; that I am not a member of any organization or group having as its purpose the overthrow by force and violence the government of the United States or any of its political subdivisions; that I have never been convicted of a crime of violence and that, if admitted to membership, I will fulfill the obligations of good sportsmanship and good citizenship. It is also understood and agreed that I will not hold the Delran Junior Marksman Club, Inc. or any of its Officers or members responsible for any injuries sustained to or by me as a result of my activity on or about the premises under the control of the Delran Junior Marksman Club, Inc. I further agree to abide by and adhere to the regulations of the Delran Junior Marksman Club, Inc.

NOW THEREFORE, the undersigned hereby expressly agrees that while on the premises of the Delran Junior Marksman Club, Inc. ranges or using any of its facilities and equipment, all shall be used at the sole risk and responsibility of the undersigned and hereby release the said Delran Junior Marksman Club, Inc. from any claims for damage or loss of any kind and description resulting from use of equipment and facilities as aforesaid, and upon the premises under the control of said Delran Junior Marksman Club, Inc. Members may be terminated for just cause and according to Delran Junior Marksman Club, Inc. By-laws.

The undersigned further expressly agrees to indemnify and hold harmless the Delran Junior Marksman Club, Inc. for any claims instituted against it arising out of the actions or torts of the undersigned while upon the property of or using the facilities under the control of the Delran Junior Marksman Club, Inc.

DATE_____SIGNATURE_____
(Applicant)

This is to certify that I am the parent/guardian of the minor registered above, and approve of his/her participating in Delran Junior Marksman, Inc. activities. It is also understood and agreed that I will not hold the Delran Junior Marksman Club, Inc., its Officers, or any members responsible for injuries sustained as a result of his/her participation. In the event my son/daughter is included in photographs, I hereby consent to the possible publication of his/her photograph.

DATE_____SIGNATURE_____
(Parent/Guardian)

Dues & Fees

☐ $ 50.00 Air Rifle/Light Rifle
☐ $ 50.00 Service Rifle
☐ $ 50.00 Trap

_____ Total

MAIL TO: **D.J.M. Membership Chairman**
P.O. Box 1134
Delran, NJ 08075-0934

Please make checks payable to:
DELRAN JUNIOR MARKSMAN CLUB, INC.

Revision Date: 08/11/10

Junior Application