



**NEVADA RANGERS  
COWBOY ACTION SHOOTERS SOCIETY  
P.O. Box 95493  
Las Vegas, NV 89193**



**MEMBERSHIP APPLICATION**

<input type="checkbox"/> New Member Membership Fee	\$ 30.00
<input type="checkbox"/> New Family Membership Fee	\$ 15.00
<input type="checkbox"/> Life Membership Fee	\$ 200.00
<input type="checkbox"/> Badges # _____ @ \$25.00 each	\$ _____
Total Enclosed	\$ _____

*Please mail completed form with your check payable to Nevada Rangers and mail to the above address*

Name \_\_\_\_\_ Alias \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

SASS# \_\_\_\_\_ NRA# \_\_\_\_\_ Date of Birth \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone Numbers \_\_\_\_\_

Family Member Name \_\_\_\_\_ Alias \_\_\_\_\_

SASS# \_\_\_\_\_ NRA# \_\_\_\_\_ Date of Birth \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

E-mail \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone Numbers \_\_\_\_\_

**PLEASE READ CAREFULLY**

You are participating in a sport in which certain damages and risks may arise; including but not limited to, accidental injury, illness, and the forces of nature. In consideration of the right to participate in this sport, and of the services provided by the **Nevada Rangers** and its agents, you do hereby assume the risks associated with the sport. You the contestant, at your own expense, shall defend management and/or all sponsors, and their members or employees, from all such claim and indemnify them from any and all liability, damage and cost arising from injury to person or property, occasioned by an act or omission by you the contestant.

I(we) hereby apply for membership in the **Nevada Rangers**. I(we) certify that if admitted as a member, I(we) will fulfill the obligations of a good sportsman and abide by the rules and regulations. I(we) acknowledge that I(we) have received a copy of the rules and regulations.

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

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

**Parental Consent for Minor**

\_\_\_\_\_ is \_\_\_\_\_ years old and has my permission to become a member of the **Nevada Rangers**.

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_

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