

Application for Membership in the

Comanche Valley Vigilantes

Check one New Member Renewal

SASS # _____ Alias: _____

Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Phone Home: (_____) _____ Mobile: (_____) _____

E-Mail address _____

NRA Member? Y N TSRA Member? Y N

Dues Schedule	Jan thru Dec	Jul thru Dec
Full Member	\$30.00	\$15.00
Junior Member	\$20.00	\$10.00
Family Membership	\$50.00	\$25.00

Renewal members must pay full annual amount, regardless of the date they renew

You must read and agree to the following before signing this application!

I herein pledge to follow all the rules and regulations of SASS and the Comanche Valley Vigilantes, and maintain the highest level of firearm safety and sportsman-like conduct in the "Spirit of the Game" at all times.

I hereby certify that I am familiar with all the safety procedures and the firearms involved in the sport of Cowboy Action Shooting, that I will always follow such rules while participating in a Comanche Valley Vigilante activity, and that I can legally own and purchase firearms under the laws of the United States and Texas.

I, the undersigned, do hereby release and discharge SASS, the Comanche Valley Vigilantes, and their representatives, agents, servants, employees, and/or land owner or operating facility associated with the Comanche Valley Vigilantes from any and all liability of every kind and character, howsoever arising, including (but not limited to) bodily injury and loss or damage of property, sustained by me, my guests, or any other person or entity, having or asserting claims or rights, by, through, or under me. I do covenant and agree to *hold harmless and indemnify* said entities and persons from any claims of the nature released or discharged, arising by, through, or under me. I understand that this is a onetime affidavit affecting me at any and all gatherings of the Comanche Valley Vigilantes.

I am signing this document as my free act and deed for the express purpose of consideration for membership in the Comanche Valley Vigilantes. (parent/guardian must also sign with minor applicant.)

Legal Signature _____ Date _____

Mail form and payment to: Buddy Chapman, P.O. Box 217 Kopperl, Texas 76652

