

Cottonwood Archery Club

Application for Membership

(Mailing address: 1302 E. 7th St. Hastings, Ne. 68901)

APPLICANTS NAME: _____
(first) (m.i.) (last)

ADDRESS: _____
(Street or p.o. box)

CITY: _____ STATE: _____ ZIP: _____

PHONE #:(____) _____

WORK #:(____) _____

DATE OF APPLICATION: ____ / ____ / ____

TYPE: ADULT / SINGLE \$40.00 FAMILY \$50.00 YOUTH \$25.00
(CIRCLE ONE)

AMOUNT SUBMITTED: _____

FAMILY MEMBERSHIP / OTHER FAMILY NAMES:

- | | |
|----------|----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |
| 5. _____ | 6. _____ |

COMMENTS:

COTTONWOOD ARCHERY CLUB'S WAIVER OF LIABILITY

I, the undersigned, hereby release COTTONWOOD ARCHERY CLUB of Hastings, NE of any liability of accident or injury caused by myself or others while being involved in COTTONWOOD ARCHERY CLUB activities.

I also agree to report any accident or injury to a CLUB committee member within a reasonable amount of time, following any accident or injury, for further review.

SIGNATURE: _____ DATE: _____