



CASWELL RANCH

APPLICATION

 \$200.00 ONE YEAR MEMBERSHIP

PLEASE PRINT

DATE OF SIGN UP _____ NEW RENEWAL

NAME IN FULL _____ YR of BIRTH _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME PHONE _____ WORK /CELL PHONE _____
(Area Code) (Area Code)

SPOUSE'S NAME _____

DEPENDENTS UNDER 21 (NAME/AGE) _____

E-MAIL ADDRESS _____

EMERGENCY CONTACT (NAME/PHONE) _____

OPTIONAL INFORMATION:

BUSINESS NAME _____ POSITION _____

BUSINESS ADDRESS _____

CITY _____ STATE _____ ZIP _____

CELL PHONE _____ E-MAIL _____

HAVE YOU EVER BEEN CONFLICTED OF A FELONY NO YES

RELEASE FROM LIABILITY AND ASSUMPTION OF RISK

**STATE OF NORTH CAROLINA)
COUNTY OF CASWELL)**

THIS IS A RELEASE FROM LIABILITY AND ASSUMPTION OF RISK. In consideration for being allowed to enter the premises and to view or participate in the activities of Caswell Ranch LLC, (CR), I, the undersigned, hereby release, remise, and forever discharge and agree to defend and hold harmless and indemnify Caswell Ranch LLC and their respective owners, officers, directors, agents, employees, successors, and assigns, of and from all liability, claims, demands, causes of action, and possible causes of action whatsoever, arising out of or related to any loss, damage, or injury (including death) that may be sustained by me (or my minor child), while in, on, en route to, from, or out of said premises from any cause whatsoever. In signing this, I acknowledge my understanding and appreciation of the inherent dangers and risks associated with the activities that I (or my minor child) will be participating in with the Caswell Ranch LLC. I am particularly cognizant of the risks and dangers associated with the use of firearms. I assume as my personal risk all the hazards of shooting activities and do hereby fully and irrevocably release and forever discharge Caswell Ranch LLC and their respective owners, officers, directors, agents, employees, successors, and assigns, from any and all claims, demands, actions, losses, and/or liability of an kind, nature or description that may be sustained by me (or my minor child).

I hereby assume as my sole personal responsibility any and all costs incurred as a result of my (or my minor child's) actions or in my (or my minor child's) behalf for rescue efforts and all medical emergencies.

In signing this Release from Liability and Assumption of Risk, I represent that I have read this document, understand it, and sign it voluntarily. I acknowledge that this Release from Liability and Assumption of Risk shall be effective and binding upon me (or my minor child). I agree that this Release From Liability and Assumption of Risk is made and performed in Caswell County, North Carolina, and is to be governed by North Carolina Law.

PRINT NAME: _____ DATE: _____

SIGNATURE: _____

(Participant)

SIGNATURE: _____

(Guardian) Parent/legal guardian must sign for persons 18 – 20 years)