

GREAT DIVIDE OUTLAWS

SHOOTING UNDER THE GREAT DIVIDE SHOOTING ASSOCIATION and Wyoming single action shooters

AFFILIATED WITH: Wyoming Single Action Shooters, Single Action Shooting Society

AFFILIATED CLUBS: Bessemer Vigilance Committee, Colter's Hell Justice Committee, Powder River Justice Committee, South Fork Vigilance Committee, Sybille Creek Shooters, Donkey Creek Shootists, Great Divide Outlaws

(Please provide as much information as you can. [*] means required.)

Name(s)* _____

Alias(s)* _____

WSAS#(s) _____ SASS#(s) _____

Mailing Address* _____

City, State, Zip* _____

Phones(s)* _____

E-mail(s)* _____

(Note: If you have an e-mail address, please provide one, as this will figure prominently in our communication with members.)

Annual Single Member \$35 Annual Couples Membership \$50

Membership Application and Registration Release

In consideration of permission to participate in and/or observe the activities of the Great Divide Outlaws hereby agree to release the Great Divide Outlaws, it's directors, members, employees, agents, volunteers, and servants as well as any sponsors, donators, contributors, landowners, landlords or participants in any activities of the Great Divide outlaws at any location; from all liability which may arise out of any damage, loss, injury or death which I might sustain, and any theft, unexplained disappearance or damage which might befall any of my property or property accompanying me, while enroute to, while participating in, during the duration of and while enroute from any activities of the Great Divide Outlaws at any location, or while on any premises owned, managed, leased or supervised by the Great Divide Outlaws at any time whatsoever. I acknowledge that I have previously used firearms and am aware of the hazards and risks inherent upon the use of firearms and upon physical proximity to any shooting activity; including, but not limited to accidental discharge of firearms and resultant personal injury or damage to property.

I VOLUNTARILY AND FREELY ASSUME ALL SUCH RISKS.

I further state that I am not prohibited by any of the laws or regulations of the United States of America or any of its subdivisions, territories or possessions from possessing firearms.

I further state that I have read the forgoing **RELEASE** and freely enter into it on behalf of myself and my heirs, next of kin, distributees, executors, and administrators.

Signature of shooter/Applicant(s) _____ Date _____

Signature of guardian if under 18 years of age _____

This form shall remain on file for the period of one year. Please sign and enclose membership fee as to your choice and remit to:

GDO/GDSA
Attn: sling lead
322 e. Miller St.
Rawlins, WY 82301