



SIUSLAW ROD & GUN CLUB

NON-MEMBER LIABILITY WAIVER & GUEST VISIT RECORD

*This waiver is valid for one day only
and must be completed each time a non-member enters the club.*

FOR CLUB USE ONLY

Record Completed:

☐ Yes ☐ No

Date: _____

Box #: _____

1. NON-MEMBER GUEST INFORMATION (Please Print)

Guest (Non-Member) Name: _____ Phone: _____

Address / City / State: _____ Email: _____

2. GUEST VISIT RECORD

VISIT NUMBER (circle one)

1

First Visit

2

Second Visit

ACCOMPANYING MEMBER'S NAME (Print)

Name: _____

Member Number (if applicable): _____

DATE OF VISIT: _____

AREAS OF THE CLUB BEING USED (check all that apply):

☐ Pistol Range ☐ Rifle Range ☐ Trap Range

☐ Other: _____

Additional Notes (optional): _____

3. LIABILITY WAIVER

By signing below, I acknowledge that I am a non-member guest of the Siuslaw Rod & Gun Club, located at 87227 Munsel Lake Road, Florence, Oregon.

I understand that participation in shooting sports involves inherent risks, including but not limited to the handling and discharge of firearms, exposure to loud noise, chemicals and metals associated with shooting and the actions of others on the range. I voluntarily assume all risks of personal injury, property damage, or other loss that may occur while on club property or participating in any activity.

I agree to fully release, indemnify, and hold harmless the Siuslaw Rod & Gun Club, its officers, members, volunteers, and agents from any and all liability, claims, demands, or causes of action arising from my presence or participation, whether caused by negligence or otherwise, to the fullest extent permitted by Oregon law.

I understand that a current club member must accompany me at all times while I am on club property, and that I may not use any facility unless this waiver is signed, dated, and deposited in one of the club's designated waiver boxes.

I agree to comply with all posted rules, safety procedures, and instructions provided by club members or range personnel. I certify that I am legally allowed to handle and discharge firearms under federal and Oregon state law.

I acknowledge that my failure to follow rules or directions may result in immediate removal from the premises and loss of future access.

My signature below confirms that I have read and understand this waiver in full and agree to be bound by its terms.

4. POLICY ACKNOWLEDGMENT & SIGNATURES

By checking the boxes below, I acknowledge that:

- ☐ I understand that guests are currently limited to two visits before becoming a member.
- ☐ I understand that I must be accompanied by my sponsoring member while on club property.
- ☐ I understand that a non-member waiver is required for every visit.
- ☐ I understand that I must follow all club and range safety rules.

Guest Signature: _____

Date: _____

Accompanying Member's Name (Print): _____

Accompanying Member's Signature: _____

Date: _____

5. CLUB USE ONLY – VISIT RECORD

☐ Visit #1 Recorded ☐ Visit #2 Recorded ☐ Membership Required Before Additional Visits

Membership Information Provided After Second Visit: ☐ Yes ☐ No

Recorded By (Print): _____ Date: _____

This completed and signed form must be deposited in the designated locked waiver box before using any range or club facility. Thank you for helping us keep our club safe.