

PGC Preregistration Form

Please complete and return this form

*** Indicates required fields**

* Last Name: _____ * First Name: _____

* Address: _____ (only used for mailing awards or certificates if applicable)

* City/Town: _____ * State: _____ * Zip Code: _____

Primary Phone Number: (_____) _____ - _____

* E-Mail Address: _____

* Gender: M FM * D.O.B. ____/____/____ (MM/DD/Year)

Self squading or assisted will be accommodated at registration desk on day of shoot.

Memorial Day Shoot N Cookout		
* NSCA # _____ * NSCA Class _____ or * Hunter Class <input type="checkbox"/> <input checked="" type="checkbox"/> if your NOT NSCA Registered	→ Concurrents For NSCA Shooters ✓ Any that apply	<input type="checkbox"/> Ladies <input type="checkbox"/> Sub Juniors (16 & younger) <input type="checkbox"/> Juniors (17 to 21) <input type="checkbox"/> Veterans (55 to 64) <input type="checkbox"/> Super Veterans (65 to 74) <input type="checkbox"/> Senior Super Veterans (75+)
Registration Fees:	Due On Day of Shoot	Paid (club use only)
Adult Registration	Main Event \$70	
Junior Registration	Main Event \$30	
Sub Gauge Registration	20 gauge \$25	

DO NOT send payment. Fees will be due on the day of shoot.

Release and Assumption of Risk

I hereby expressly assume any and all risks associated with shooting at the Petersham Gun Club, located at 158 Nelson Rd, in Petersham Massachusetts. I know shooting is considered by many to be a dangerous activity, and I hereby assume the risk of any and all injuries I may suffer due to the physical condition of the Petersham Gun Club, the acts or omissions of other shooters who may be on or near the Petersham Gun Club whether with or without permission, equipment failure, acts of God and/or for any other reason. I have been advised that there will be other persons shooting and carrying firearms at the Petersham Gun Club, and I agree to act prudently and carefully to avoid causing them any injury. I certify that I am familiar with the use and operation of the firearm(s) I will be using while at the Petersham Gun Club and that I am familiar with the rules of shooting and firearm safety. I release the Petersham Gun Club together with all their employees, volunteers, agents and representatives for any and all claims for personal injury, wrongful death and/or property damage which may arise in my favor and which may occur during or as a result of my presence at the Petersham Gun Club as referenced above regardless of the cause of any such injury and including those which may be caused by negligence and/or any other cause. I give this release and assume the entire risks attendant thereto in consideration of being allowed to enter into and shoot at the Petersham Gun Club. This "release and assumption of risk" will be binding on my heirs, executors and assigns.

I HAVE READ THE ABOVE STATEMENT.

* Sign: _____ Date: _____

If your sending this form electronically don't worry about the signature, we'll get it on day of shoot.