

COVEY RISE GUN CLUB

CORPORATE APPLICATION FOR MEMBERSHIP

EMERGENCY CONTACT: _____

PHONE _____ ALTERNATE # _____

ADDRESS: _____

BILLING INFORMATION

CHECK THE PREFERRED METHOD OF PAYMENT FOR MONTHLY DUES

_____ CHECK _____ VISA _____ MASTERCARD _____ AMEX _____ DISCOVER

NAME AS IT APPEARS ON CREDIT CARD

CARD NUMBER _____ EXP DATE: _____/_____/_____

CVS CODE _____ BILLING ADDRESS _____

CITY _____ STATE _____ ZIP _____

_____ I AUTHORIZE COVEY RISE LODGE TO AUTO DRAFT MY DUES ON THE 5TH OF EACH MONTH.

_____ I WOULD LIKE TO HAVE MY STATEMENT **EMAILED** TO ME EACH MONTH AT THE FOLLOWING EMAIL ADDRESS, SO I MAY SUBMIT A PAYMENT VIA CHECK OR CREDIT CARD AUTHORIZATION.

EMAIL ADDRESS _____

_____ I WOULD LIKE TO HAVE MY STATEMENT **MAILED** TO ME EACH MONTH AT THE FOLLOWING ADDRESS, SO I MAY SUBMIT A PAYMENT VIA CHECK OR CREDIT CARD AUTHORIZATION.

STREET ADDRESS _____

CITY, STATE, ZIP _____

COVEY RISE GUN CLUB
CORPORATE MEMBERSHIP FOR SPORTING CLAY

INITIATION ONE TIME FEE: \$500.00

CORPORATE MEMBERSHIP FEE PER MONTH \$130.00 + TAX

MEMBERSHIP INCLUDES:

- 400 TARGETS PER MONTH – UNUSED TARGETS ROLLOVER MONTH TO MONTH.
- ADDITIONAL CLAYS MAY BE PURCHASED FOR YOU OR YOUR GUEST FOR \$0.30 EACH
- **TWO** GOLF CARTS MAY BE USED FOR UP TO 3 HOURS. THE CARTS HOLD UP TO 4 PEOPLE.
- IF YOU NEED AN ADDITIONAL CART IT CAN BE RENTED FOR \$40.
- DRIVERS MUST BE 16 OR OLDER WITH A VALID DRIVERS LICENSE.

NOTE:

- ALWAYS CALL OR EMAIL TO SCHEDULE YOUR SHOOTING TIME.
- YOUR GUEST MUST SIGN A RELEASE WAIVER EVERY TIME THEY VISIT THE FACILITY.
- EVERY AUTHORIZED MEMBER ON YOUR ACCOUNT MUST FILL OUT AND SIGN A RELEASE WAIVER ANNUALLY TO BE KEPT ON FILE.
- THERE IS A \$50 CARD REPLACEMENT FEE IF YOU LOSE OR BREAK YOUR CLAY CARD.
- IF YOU CANCEL YOUR MEMBERSHIP YOU MUST RETURN YOUR CARD AND FORFEIT ALL UNUSED CLAYS OR ELSE YOU WILL CONTINUE TO BE BILLED.

RELEASE WAIVER

I, _____, as Primary Representative, is submitting this application for membership in Covey Rise Gun. I understand that should membership be offered by the Club and accepted by myself on behalf of _____ (COMPANY NAME), I will be responsible for any and all matters; financial, procedural and otherwise relating to Covey Rise Gun Club unless and until another Primary Representative is designated in writing for this membership account. I agree to all the terms and conditions of membership as set forth in the Membership Program and will ensure that any guests and/or other authorized users of this membership observe same.

Signed: _____ Date _____
Signature of Applicant

Received by: _____ Date _____

COVEY RISE LODGE

PO Box 40 / 24009 Singing Waterfall Rd / Husser, La 70442 / Tel: 985-747-0310

ASSUMPTION OF RISK AND RELEASE OF CLAIMS

1. I understand that serious RISK OF INJURY from the activities involved at COVEY RISE LODGE are significant, including the potential for permanent paralysis and death. While skills, equipment and personal discipline may REDUCE the risk, the **RISK OF SERIOUS INJURY DOES EXIST** to both the active participant and the nearby onlooker.
2. I understand that serious HEARING LOSS may result from being in the proximity of a discharging firearm. I acknowledge that Covey Rise Lodge has advised me to wear eyeglasses and ear protection, and that proper equipment is available for rental and/or purchase.
3. I knowingly and freely **ASSUME ALL RISKS, BOTH KNOWN AND UNKNOWN**, even if arising from THE NEGLIGENCE OF THE RELEASE or others and assume full responsibility for my participation. Risk caused by any owner, employee guest, invitee, licensee, member, trespasser or agent are also assumed by me.
4. All golf carts are operated **AT MY OWN RISK**. Operators must be 16 years or older to operate them and must possess a valid driver's license. All liability will be assumed by the operator or responsible adult.
5. I hereby assume all risk and full responsibility for all food and/or alcohol consumed on the property and any and all actions that I may be involved in after leaving Covey Rise Lodge.
6. I hereby certify that I have no pre-existing medical condition that would be aggravated by the activities at Covey Rise Lodge
7. I have carefully read this release and fully understand its contents. I am aware that this is a release of liability and that by signing this release I am giving up valuable legal rights in exchange for the privilege of participating in bird hunting, sporting clays and related activities on the premises. I release and hold harmless Covey Rise Lodge, their agents, employees, volunteers and affiliated organizations who, through negligence or carelessness might otherwise be liable to me, or to my heirs or assigns for damages while in or on the Covey Rise Lodge grounds while competing, observing, officiating, or participating in any manner in the sport of sporting clays, skeet or trap. As consideration for being permitted by Covey Rise Lodge to participate in sporting clays and all related functions, I hereby agree that I, my heirs and assigns will not make a claim of any kind against Covey Rise Lodge and/or any of their affiliated organizations, owners, employees, agents or volunteers for personal injury, or death.
8. I further agree that this release applies to any minor children participating with me in bird hunting and sporting clay released events.

Print Name

Date

Signature

Home Phone

Cell Phone

Address

City

State

Zip

E-mail Address: _____

* Children under the age of 18 to be covered by waiver

Birthdate: Month/Date/Year
