



**WILMINGTON TRAPSHOOTING ASSOCIATION
APPLICATION FOR ANNUAL MEMBERSHIP**

(Annual Membership: January 1st to December 31st)

Complete this application and send with **\$75.00** (Annual Dues) check to:
WTA, PO Box 9203, Newark DE, 19714.

If you want a Membership Card sent to you, enclose a stamped, self-addressed envelope. Otherwise a Membership Card may be picked up at the club. Your Member's Hat or Patch (see below) may be picked up at the club.

Benefits of Membership in WTA

- Dues support WTA's trapshooting facilities and activities.
- A WTA Hat or WTA Patch (the first time you join).
- Members are entitled to attend the Spring League Picnic.
- **Members are entitled to a discounted price on practice rounds of trap and skeet.**

NEW ANNUAL MEMBER _____ ANNUAL RENEWAL _____

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____ SEX M _____ F _____

EMAIL ADDRESS _____

DATE OF BIRTH _____

Signature of Applicant

Date

(WTA will provide the necessary signatures below.)

The undersigned, each a Life Member of Wilmington Trapshooting Association, is personally acquainted with the applicant and know him/her to be the person completing this application and do hereby propose him/her for membership in Wilmington Trapshooting Association.

Life Member - WTA

Life Member - WTA

Any irregularity of procedure in the issuance of any membership shall be grounds for terminating and revoking said membership.

Please read and sign on the back (required).

**Acknowledgement of Risk, Release of Liability, and
Assumption of Personal Responsibility
For Use of Firearm**

The Wilmington Trapshooting Association (WTA)

I, _____, understand that while at the Wilmington Trapshooting Association (here after, WTA) as a shooter, spectator, volunteer or paid worker, I may be exposed to above-normal risks. These may include, but are not limited to: accidental discharging of a firearm during practice or competition possibly resulting in bodily harm; the possibility of being injured due to firearm malfunction; being injured due to any unforeseeable accidents while at practice or competition. I will follow the instructions of WTA officers, officials and/or shooting range staff to minimize those risks.

I understand, too, that although the WTA; its Board of Trustees, collectively and individually; its officers, members , employees and agents have taken precautions to provide proper equipment and qualified supervision, it is impossible for WTA to guarantee absolute safety. Also, I understand that I share the responsibility for safety during activities where firearms are present, and I assume that responsibility. In the event I am injured for any reason including but not limited to an accident or negligence involving myself, or any individual, I agree that that the WTA; its Board of Trustees, collectively and individually; its officers, members , employees and agents will not be held liable.

In addition, if I, while shooting at Wilmington Trapshooting Association use my own or another person's firearm, I understand that I am responsible for any incident causing harm to myself or to another while using that firearm.

I believe that I have no physical or psychological problems that would prohibit my safe participation in any activity at WTA he activity, and believe myself to be in good physical and mental condition. I agree to comply I will follow the instructions of WTA officers, officials and/or shooting range staff.

I have carefully read the following Shooting Range Rules established for safe use of the range at Wilmington Trap Association, and any firearms used on the range, and agree to abide by them.

Shooting Range Rules – Courtesy of the NRA

Always point gun in safe direction
Always keep your finger off the trigger until time to shoot.
Always keep the gun unloaded until ready to fire.
Know your target and what is beyond.
Know how to use the gun safely.
Be sure gun is safe to operate and use correct ammunition.
Wear eye and ear protection.
Never us alcohol or drugs before handling a firearm.
Do not leave guns unattended.

Signature

Date