

**-Wartrace Regulators, Inc.**  
**Membership / Renewal Application**  
Statement of Risk; Acceptance of Liability  
Waiver of Rights of Action 2018

**ALIAS:** \_\_\_\_\_

**SASS#:** \_\_\_\_\_

**First Name:** \_\_\_\_\_

**Last Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Telephone: Home** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**NRA#:** \_\_\_\_\_

List any particular talents that may assist the Wartrace Regulators

**MEMBRSHIP FEES**

**New Members**

|                              |          |       |
|------------------------------|----------|-------|
| Initial fee: (One Time Only) | \$50.00  | _____ |
| Annual Dues: (Individual)    | \$80.00  | _____ |
| Annual Dues: (Family)        | \$100.00 | _____ |

EACH FAMILY MEMBER LIVING AT HOME MUST FILL OUT APPLICATION & WAIVER

**Member Renewal**

|                           |          |       |
|---------------------------|----------|-------|
| Annual Dues: (Individual) | \$80.00  | _____ |
| Annual Dues: (Family)     | \$100.00 | _____ |

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TOTAL \_\_\_\_\_

If payment by check make check out to: WARTRACE REGULATORS  
Complete form need to update our records for 2018 Mail to: Papa Dave  
c/o David Bruschi  
952 Williams Road  
Manchester, TN 37355  
Phone: Cell 931-636-7115 Home 931-723-7896  
Email: papadaveb17266@att.net

Statement of Risk; Acceptance of Liability;  
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The following is set forth as approved by the board of directors of the Wartrace Regulators, Inc. a Tennessee corporation, in order that the participants in the Wartrace Regulators SASS matches are informed of the risks inherent in our sport and the safety responsibilities they must assume.

We are proud of the accident free safety record of our shooting events. To maintain this record we must not relax our perception of the potential dangers involved; nor our strict adherence to the safety rules set forth in the SASS Shooters Handbook, all of which apply to The Wartrace Regulator's SASS matches. The match officials cannot be everywhere at any one time, nor can they see every angle from the position that they occupy at any one point in time. We must, therefore, rely on our participants to assist us.

Each competitor is required to familiarize him/herself with potentially dangerous situations and agrees to take personal responsibility for taking whatever actions are necessary to prevent these situations from arising or to diffuse them after they have arisen. It is each participant's responsibility to adhere to, and to inform his/her guests of, the safety rules set forth in the SASS Shooters Hand Book.

**THIS SPORT HAS THE POTENTIAL TO BE LIFE-ENDANGERING.**

By signing this document, I agree: 1) to assume personal responsibility as described herein; 2) to personally assume the risks involved; 3) to waive the rights of action against The Wartrace Regulators, Inc., participants, landowners and/or sponsors that may arise in connection with the Wartrace Regulator's monthly match; 4) I certify that I have received, read and understand the SASS Shooters Handbook and I agree to conduct myself accordingly.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
SASS Number

\_\_\_\_\_  
Signature (of Guardian if shooter is under age 18)

