



Suffolk Archers, Inc.

86 Pidgeon Hill Road
Huntington Station, New York 11746-4555
Membership@suffolkarchers.com
(516) 873-8898

Complete and sign all forms.
The certification must be notarized.
Return the completed application to:

Scott Johnson
Suffolk Archers, Inc. Membership Chairman
86 Pidgeon Hill Rd
Huntington Station, NY 11746

All member candidates must be sponsored by a member in good standing who has been a member for at least one year

All member candidates are required to complete an interview with the Membership Committee.

All new members are required to take a range safety course before using the facility.

Incomplete applications will not be processed until all required information has been supplied.

Memberships terminate and all member's rights and interests are forfeited on December 31st of each year unless membership is renewed prior to expiration.

Application for Membership In Suffolk Archers, Inc.

NAME: _____ DATE OF BIRTH: ___/___/___

CERTIFICATION:

I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT. I UNDERSTAND THAT ANY OR ALL OF THE PROVIDED INFORMATION MAY BE VERIFIED AND IF ANY INFORMATION IS FOUND FALSE OR UNTRUE, ACCEPTANCE IN SUFFOLK ARCHERS, INC. MAY BE DENIED OR LATER REVOKED.

I UNDERSTAND THAT MEMBERSHIP IS SUBJECT TO APPROVAL OF THE BOARD OF DIRECTORS AND IS NOT GUARANTEED. I UNDERSTAND THAT I WILL BE INTERVIEWED BY THE MEMBERSHIP COMMITTEE AND/OR THE BOARD OF DIRECTORS AND THAT I MAY BE ASKED TO DEMONSTRATE MY SHOOTING ABILITY. I UNDERSTAND THAT IF APPROVED, THAT MY MEMBERSHIP IS PROBATIONARY AND CAN BE REVOKED AT ANY TIME DURING THE FIRST YEAR AT THE SOLE DISCRETION OF THE BOARD OF DIRECTORS.

I AGREE TO ABIDE BY THE RULES AND BY-LAWS OF SUFFOLK ARCHERS, INC. AND I UNDERSTAND THAT I MUST ATTEND THE REQUIRED ORIENTATION AND SAFETY LECTURE BEFORE USING THE FACILITIES.

I UNDERSTAND THAT IF MY MEMBERSHIP IS NOT REVOKED DURING THE FIRST YEAR, I MUST RENEW MY MEMBERSHIP ANNUALLY BY MARCH 31ST TO REMAIN A MEMBER IN GOOD STANDING OR I WILL FORFEIT ALL MY MEMBERSHIP RIGHTS AND INTERESTS ACCRUED IN SUFFOLK ARCHERS, INC.

PARENT SIGNATURE: _____

DATE: ___/___/___

NOTARY PUBLIC:

SUFFOLK ARCHERS SAFETY RULES AND POLICIES AGREEMENT

It is the responsibility of the “primary” member to ensure that all family members and guests entering upon the Suffolk Archers facility are familiar with these Safety Rules and that they agree to abide by them. Members of Suffolk Archers and their guests, whenever on the facility, including when attending scheduled events, shall observe the following range and safety rules to insure the safety of all participants.

1. **ABSOLUTELY NO BROAD HEADS OR PRACTICE BROAD HEADS** to be shot on the range or practice butts (except at the Broad Head Pit located at the end of the road at the top of the range). ***Violation of this Safety Rule is cause for immediate revocation of membership.***
2. **ASOLUTELY NO CROSSBOWS or FIREARMS will be shot anywhere on Suffolk Archers Property at any time.** ***Violation of this Safety Rule is cause for immediate revocation of membership.***
3. The entrance gate shall be closed and locked upon entering and leaving, to discourage trespassing. **Giving access to non- - members by sharing/lending gate key cards is cause for revocation of membership.**
4. A person acting unruly or in an unsafe manner will be asked to leave.
5. It is the responsibility of every archer to insist upon strict standards of safety and courtesy.
6. No Pets are allowed on Suffolk Archers property.
7. No Alcoholic beverages or illegal drug use allowed on Suffolk Archers property.
8. Never put an arrow on the string until it is safe to shoot.
9. Never shoot into the air or draw your bow higher than the level of your intended target. If your bow draw--weight is so high that you must point your arrow skyward to pull the string, reduce poundage.
10. Members and guests will only shoot at prescribed target butts, knock-a-blocks or 3D targets, etc. (no aiming at trees or animals).
11. Members and guests, will not cross or move forward of the shooting line, for any reason, until all shooting has ceased and all shooters on the line know and acknowledge there is a cease fire.
12. Members and guests will walk from target to target using the prescribed marked trails, in an ascending order. (Example: Target #7 to Target #8) No shortcuts or backtracking allowed.
13. When looking for lost arrows, YOU MUST ‘PROTECT’ THE TARGET. If you are alone, take the paper target off the face of the butt and place your bow conspicuously in front of the butt, knock--a block or 3Dtarget, to let the next person know you are behind the target. If you are in a group, one person must always stay visible in front of the butt, knock--a--block or 3D target, ‘protecting’ the target.

**SUFFOLK ARCHERS
SAFETY RULES AND POLICIES AGREEMENT**

I have read the Suffolk Archers Safety Rules and Policies, I (and my family members covered under the membership) understand them, and agree to abide by them at all times.

Print Participant's NameParticipant's Signature

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Member

Print Participant's NameParticipant's Signature

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Parent

**PLEASE RETURN THIS AGREEMENT ALONG WITH YOUR MEMBERSHIP
APPLICATION OR MEMBERSHIP RENEWAL APPLICATION AND
WAIVER/RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT.**

Suffolk Archers, Inc.
Waiver/Release of Liability And Assumption of Risk Agreement
*****Read Before Signing*****

In consideration of use of Suffolk Archers, Inc. facilities and/or being allowed to participate in any way in Suffolk Archers, Inc. events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury from archery and other known and unknown events and activities and/or the use of the related buildings, structures, equipment, automobiles, firearms, weapons, ATVs, boats, tree stands, roads, bodies of water, land and all other real and personal property whether owned by Suffolk Archers, Inc. or others is significant, including the potential for permanent paralysis or death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury or death does exist, and
2. I acknowledge and agree that the use of archery equipment or any other items by myself or others on Suffolk Archers premises or otherwise are inherently dangerous and high risk activities whether such archery equipment are discharged or used in any way by myself, others, and
3. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown. EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation, and
4. I willingly agree to comply with the stated and customary terms and conditions for participation. If however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately, and,
5. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin. HEREBY RELEASE AND HOLD HARMLESS Suffolk Archers, Inc., its officers, directors, officials, agents, employees, volunteers, members, guests, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of real property and personal property used to conduct the events and activities ("RELEASEES"), WITH REPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, TO THE FULLEST EXTENT PERMITTED BY LAW.

ALL PARTICIPATING FAMILY MEMBERS LISTED ON THE MEMBER APPLICATION OR RENEWAL APPLICATION THAT ARE 18 YEARS OLD OR OLDER MUST SIGN THIS FORM. NON-PARTICIPATING FAMILY MEMBERS MUST COMPLETE A GUEST WAIVER FORM UPON ENTERING THE PROPERTY.

I HAVE READ THE WAIVER/RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Print Participant's Name Participant's Signature

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Member

Suffolk Archers, Inc.
Waiver/Release of Liability And Assumption of Risk Agreement
*****Read Before Signing*****

Print Participant's NameParticipant's Signature

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Parent

FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF PARTICIPATION)

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in these events and activities and/or the use of related real and personal property as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE

Print Minor's Name:.....

Print Name of Parent/Legal Guardian:.....

Parent/Guardian Signature:.....

Date Signed:.....

Emergency Phone Number:.....

Completed Waiver/Release forms should be kept on file by the club for at least 7 years and indefinitely in the event of a significant injury to a particular participant.

ATTACH ADDITIONAL SIGNATURE PAGES IF NECESSARY.

PLEASE RETURN THIS AGREEMENT ALONG WITH YOUR MEMBERSHIP APPLICATION OR MEMBERSHIP RENEWAL APPLICATION AND SAFETY RULES AND POLICIES AGREEMENT.