**Make checks payable to "ALGC"** and mail completed application to:
Tony Lavalle
P.O. Box 487
Valley City, OH 44280

Please write legibly as I do not read Hieroglyphics!

NAME _____ IDPA # _____
ADDRESS _____
CITY _____ STATE _____ ZIP CODE _____
PHONE NUMBER _____ E-MAIL _____

DIVISON
( ) Custom Defensive Pistol
( ) Stock Service Pistol
( ) Enhanced Service Pistol
( ) Stock Service Revolver
( ) Enhanced Service Revolver

CLASSIFICATION
( ) Master
( ) Expert
( ) Sharpshooter
( ) Marksman
( ) Novice*

* To shoot Novice, you must have shot the classification match and scored below Marksman. No unclassified shooters.

( ) Lady ( ) Senior ( ) Distinguished Senior ( ) Law Enforcement
( ) Junior, under 18

Match T-Shirt Size

( ) Small ( ) Medium ( ) Large ( ) X-Large ( ) XX-Large ( ) XXX-Large

Type Gun Used

Make _____ Model _____ Caliber _____

**Waiver, Release, and Covenant Not to Sue.** In consideration of Ashland Lake Gun Club, Inc. (ALGC) permitting me to engage in the activities of that corporation, I on my own behalf and on the behalf of my heirs, representatives, administrators and assigns, hereby waive and release any and all claims, demands, causes of action, suits and rights I, or anyone on my behalf might have against that corporation, its officers and/or trustees, directors, members, and agents for personal injury (including death), loss or damage to my property which I (or anyone claiming by or through me) may have against that corporation, its officers and/or trustees, directors, members or agents as a result of my taking parting activities in, on or about the premises of ALGC sponsored by, sanctioned by or approved by that corporation, its officers or directors.
**Further I agree** that I will not, nor will anyone acting on my behalf (claiming by or through me), bring or maintain any suit in Court to assert any claim against that corporation, its officers and/or trustees, directors, members or agents, for any claim that I might have arising out of my participation in any activities sponsored by, sanctioned by or approved by that corporation, its officers and/or trustees, directors, members or agents.
**I understand** that engaging in shooting activities constitutes my involvement in a very hazardous and dangerous activity with accompanying risks of personal injury or death and loss or damage to personal property, and I hereby voluntarily assume those risks.
**By signing below**, I certify that I have read and understand the forgoing provisions of this waiver, release and covenant not to sue and I have executed this instrument voluntarily on this date.
**I represent** that I am legally allowed and am of an appropriate age to own, possess and/or operate a firearm and enter into this agreement and will not give or loan a firearm to a minor or any individual who is not legally allowed to own, possess and/or operate a firearm.
**Any individual, under 18 years of age, must have a parent or legal guardian sign on their behalf.**

Print Name _____ Sign _____ Date _____