





## THE TRI-CITIES METALLIC SILHOUETTE ASSOCIATION

P.O. Box 4587, Pasco, WA 99302-4587

I, \_\_\_\_\_, as a member of the Tri-Cities Metallic Silhouette Association (TCMSA), hereby acknowledge the following:

1. I have received a copy of, read, understand, and agree to comply with the club's Safety, and Range Rules.
2. I understand I am personally responsible for my own safety and the safety of my guests at all times while at the TCMSA Range. I accept personal responsibility for my actions and the actions of my guests, including being financially responsible for damages caused by myself and/or my guests.
3. I agree not to transfer control of my range key or combination to anyone other than club officers.
4. I will take no action(s), or fail to take any action(s), which may endanger me or anyone else on, or near, the TCMSA Range.
5. I will actively assist in supporting and enforcing the club's goals, rules, and policies.
6. I acknowledge the proper means of enforcing the club's safety rules is to tactfully point out the situation to the individual performing the act in question. I understand that if this does not correct the situation, I am to:
  - a) Obtain the individual's name and/or automobile license plate number,
  - b) Leave the range, and
  - c) Report the situation to a club officer and/or to the membership at a regularly scheduled club meeting.
7. I acknowledge failure to comply with the club's safety rules by myself or by any of my guests can result in my immediate removal from the range and/or permanent removal from the club.
  - a) I agree that if I am asked to leave the range for safety reasons, I will peacefully leave the range.
  - b) I understand I can originate a discussion of the situation at the next regularly scheduled TCMSA meeting;
  - c) I will not create a confrontation at the range.
8. I acknowledge my obligation to comply with all applicable state and federal firearms laws.
9. I have completed the TCMSA Range Orientation program. Date of Class. \_\_\_\_\_

I hereby state that I am voluntarily agreeing to the above terms, the TCMSA By-Laws, the TCMSA Policy Book, and all referenced TCMSA rules and regulations.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_