

PO Box 4552 Laguna Beach, CA 92652

Complete this application with the attached **SMGC Liability Waiver Form**. Mail this form to the listed address above or bring it to the monthly rifle/pistol match with the appropriate payment. Annual SMGC memberships expire at the end of January of the following year. PLEASE PRINT LEGIBLY.

First: _	Middle:	Last:	Suffix:	Gender (M/F):	
Address	:	City:	State:	Zip:	
Home Pl	none:	Cell Phone:	DOB (mm/	[/] dd/yyyy):	
DL#: _		State/Provence Issued:	(copy of your	DL with app required)	
Email:					
Rank:	(only if curr	ent or retired US armed forces, enter ran	k abbreviation, not pay g	rade)	
Category	Active Military Retired Mili	tary Civilian Dependent	t Prior Service		
Branch:	Active	e Reserve			
USMC Ran	ge Safety Officer (RSO) for Camp Pendleton in a	accordance with USMC Directives: Yes	☐ No If Yes, RSO ID & Exp	Date:	
Are you a	certified medical professional (EMT,LVN,RN,NP,		No If Yes, Cert/Lic Exp	Date: medical certificate/license with this app.	
	Medal of Honor, Silver Star, \$50 Regular2 US Armed Forces n \$50 Regular3 EMT, LVN, RN, NP,	al Dues - US Armed Forces member (Navy Cross, and Purple Heart recipien member (Retired, Dependents are Ass PA, MD, DDS, DMD, DDS, DVM, etc. ember Renewal (existing Regular me	nts sociate Members and g	_	
	Signature of club Officer	accepting and assigning membership	o:		
	PREVIOUSLY ASSIGNED <u>Civilian Regular N</u> . ASSOCIATE MEMBERSHIPS entitles me				
Laws and	and that Civilian Regular Membership in t Host Facility Regulations. As Civilian Reg ed for Civilian Regular Membership as defi	ular Memberships become available, I un	derstand that a Non-Mil	itary Associate Memberships will be	
1	_ I certify that the information on Page 1 o	of this application form is correct.			
	I further certify that I can legally particip of a felony or misdemeanor crime which				
3	I further agree to obey all rules and regulations governing the use of military facilities as issued by the appropriate authorities and that failure to obey these rules and regulations may result in arrest and conviction in federal court.				
4	Any misrepresentation of facts may res period of up to five (5) years.	ult in disbarment from the Santa Marga	rita Gun Club, Marine Co	rps Base Camp Pendleton, CA for a	
DATE: _	SIGNATURE:				
	a Margarita Gun Club is not affiliated with any other branch of the United States mili			he United States Department of the ership Application Form - v20230201	



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RELEASE FROM RESPONSIBILITY, WAIVER OF LIABILITY AND ASSUMPTION OF RISK FOR PARTICIPATION IN A DANGEROUS ACTIVITY

FOR AND IN CONSIDERATION of permitting the applicant for Santa Margarita Gun Club Membership, who is named on the membership application form and herein referred to as THE UNDERSIGNED, to enter the MARINE CORPS BASE CAMP PENDLETON AND SANTA MARGARITA GUN CLUB, herein referred to as the "Santa Margarita Gun Club", premises for the purposes of firearms use, shooting of firearms, observing the shooting of firearms, or any and all other purposes, THE UNDERSIGNED, for himself/herself his/hers heirs, executors, administrators and assigns:

- 1. Hereby voluntarily releases, discharges, waivers and relinquishes any and all actions or causes of action for personal injury, property damage or wrongful death occurring to the undersigned arising as a result of engaging in or being present at activities at the San Margarita Gun Club premises.
- 2. Hereby covenants not to sue and voluntarily releases, waivers, discharges and relinquishes any action or causes of action, aforesaid, which may hereafter arise for himself/herself and for his/her heirs, executors, administrators and assigns prosecute or present any claim for personal injury, property damage or wrongful death against MCB, Camp Pendleton, CA, or the Santa Margarita Gun Club or any of its officers, agents, servants or employees for any of said causes of action, whether the same shall arise by negligence of any of said persons or otherwise. IT IS THE INTENTION OF THE UNDERSIGNED BY THIS INSTRUMENT, TO EXEMPT AND RELIEVE THE SANTA MARGARITA GUN CLUB OR ANY OF ITS' OFFICERS, AGENTS, SERVANTS OR EMPLOYEES; INCLUDING VOLUNTEERS, FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY NEGLIGENCE.
- 3. Agrees that in the event any claim for personal injury, property damage or wrongful death shall be prosecuted against the Santa Margarita Gun Club. The Undersigned shall indemnify and save harmless the same Santa Margarita Gun Club and any of its officers, agents, servants, or employees, including volunteers, from any and all claims or causes of action by whomever or wherever made or presented for personal injuries, property damage or wrongful death.
- 4. Agrees that the foregoing release is intended to be as broad and inclusive as permitted by the laws applicable in the State of California and that of any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.
- 5. Acknowledges that the Undersigned has been fully and completely advised of the potential for serious accident incidental to engaging in firearms activities, including the potential for death, personal injury and property damage, and expressly agrees to assume all risks of loss, damage or injury that may be sustained by the Undersigned.
- 6. I certify that the above information is correct. Any misrepresentation may result in disbarment from participation in this Match. I have read the Release from Responsibility Form of this entry form and voluntarily abide by this agreement being fully aware of legal consequences of signing the within instrument.

7. This agreement supersedes all previous agreements and shall remain in force until March 1, 2026.

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DATE: SIGNA	TURE:					
A copy of your Current Driver's License is required to be submitted to the Club with this application.						
Emergency Notification Information (In case of injury, and/or serious illness, whom should SMGC contact?)						
Name:	Relationship:		Phone:			
SPECIAL MEDICAL ISSUES: (Voluntary Information) In the event of a Medical Emergency which you are involved in; do you have ANY SPECIAL MEDICAL CONSIDERATIONS WHICH MAY BE NEEDED TO BE KNOWN BY RESPONDING EMERGENCY / MEDICAL PERSONNEL? Do you have any Allergies or any Medication Allergies? Do you have any Other Medical Issues?						

The Santa Margarita Gun Club is not affiliated with the United States Government, the United States Marine Corps, the United States Department of the Navy, or any other branch of the United States military and armed forces.

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