

Front Range IDPA Club Application Form

Member No. _____
(Front Range IDPA use only – DO NOT WRITE HERE)

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____

E-Mail: _____ IDPA Member No. _____

IDPA Classification:

(Check one box per class.
Mark "Un" if not classified)

	<i>Un</i>	<i>NV</i>	<i>MM</i>	<i>SS</i>	<i>EX</i>	<i>MA</i>
SSR						
ESR						
SSP						
ESP						
CDP						

Please list any firearms related certifications that you hold. Include Match Conduct Safety, RO or SO, NRA Instructor, IPSC Classification, etc. _____

Please list any skills, occupations/avocations that would benefit the club. _____

Level Of Club Certification/Training (check all that apply)

IDPA Safety Officer	Advanced Safety Officer	Range Master	Match Director
Rifle/Shotgun tactics/Conduct	Match Conduct Student	Match Conduct Trainer	

\$30 Individual

\$30 Family + ____ x **\$15** for each additional family member

\$15 Associate Member, nonvoting (under 18)

Make checks payable to: **Front Range IDPA**

Send To: **Front Range IDPA - Membership**
Post Office Box 533
Broomfield, CO 80038

(Please read and sign waiver and legal statement on next page)

WAIVER, RELEASE AND COVENANT NOT TO SUE

In consideration for allowing my attendance at any class, course, instruction, training, event and/or match given, sponsored, endorsed or taught by ANY member of Front Range International Defensive Pistol Association, hereinafter referred to as Front Range IDPA, and for allowing my presence on any premises controlled by or otherwise used for any reason by Front Range IDPA for any purpose, and for allowing my attendance at any Front Range IDPA classes, courses, instruction, training, events and/or matches, I, on my own behalf and on behalf of my children, spouse, heirs, executors, administrators, legal representatives, assigns and successors in interest (hereafter collectively "successors") hereby acknowledge the following and hereby freely agree to and make the following representations and agreements with the express intent of extinguishing the legal rights referenced herein:

I fully realize, acknowledge and assume the risks of the dangers of practicing pistol shooting and any of the techniques taught that use any form of firearm and being present at and/or participating in a handgun class, course, instruction, training, event and/or match or my own practice or these activities. I understand that the participants in this class, course, instruction, training, event and/or any match will be using deadly weapons in a timed, stressful environment and that they may make mistakes in judgment an/or in the proper control of their weapons. Weapons may malfunction. Ammunition may malfunction. The courses of fire may not be safe. The range, classroom, facilities or other properties where any class, course, instruction, training, event and/or any match may be held itself may not be suited to hold this class, course, instruction, training, event and/or any match safely. The participants and attendees may not be adequately supervised in how they act in competition and/or in how they handle their weapons when not competing. I fully assume all risk associated with being present where such a dangerous activity is ongoing and/or participating in such a dangerous activity, including but not limited to the risks stated above. I understand that the individuals involved in running this class, course, instruction, training, event and/or any match I may attend cannot and do not attempt to validate the safety of the weapons, the ammunition, the equipment, or the participants.

I hereby waive, release and discharge for myself, my children, and my successors, any and all rights, claims, demands or suits which may be asserted, made or recovered against the sanctioning organization, Front Range IDPA, the International Defensive Pistol Association, **the Clear Creek County Sportsman's Club, the Pikes Peak Gun Club** any and all teachers, instructors, trainers or participants in any class, course, instruction, training, event and/or any match, all match directors, all range and/or safety officers, all other individuals involved with the running of this class, course, instruction, training, event and/or any match attended, and all property owners (and their respective agents, officials and employees) through or by which this class, course, instruction, training, event and/or match is held which arise from my presence at or participation in any class, course, instruction, training, event and/or any match held at any range, classroom, facilities or other properties specifically including, but not limited to, any class, course, instruction, training, event and/or match operated pursuant to the guidelines of the International Defensive Pistol Association, or those of Front Range IDPA.

I also covenant never to institute any action or suit in law or equity, nor aid in the prosecution of any claim, demand, action or cause of action which arises or may arise from my presence at or participation in any class, course, instruction, training, event and/or match held in any classroom setting or at any range, specifically including, but not limited to, any match operated pursuant to the guidelines of the International Defensive Pistol Association or those of Front Range IDPA.

Should I or any of my children or successors assert any claim in contravention of this agreement, I, my children, or my successors shall be liable for the expenses (including attorneys fees) incurred by the other party or parties in defending the action. This agreement may not be modified orally. This release shall be valid now and for all classes, courses, instruction, training, events and/or matches I attend in the future.

I affirm that, in accordance with all state and federal laws, I can legally own and use firearms and that my participation in this class, course, instruction, training, event and/or match and the use of a firearm while doing so does not violate any laws, codes or other legal restrictions that may bind me.

NOTE: If you do not consent to these conditions and agreement, you are not eligible for membership in FRIDPA **nor participation in any FRIDPA event.**

_____ Signature of Participant (or parent or legal guardian or attendee)	_____ Date	_____ Print Name of Participant
_____ Address	_____ Phone	
_____ Email	_____ IDPA Member Number	

Passed Match Conduct Safety Course

Safety Officer & Date

FRONT RANGE IDPA – WAIVER

Year	January	February	March	April	May	June	July	August	September	October	November	December
2014	<i>initial</i>											
2015												
2016												
2017												
2018												

Please initial underneath the match month for the appropriate year.