

# Southwest Florida Sportsman's Association Guest Range Agreement

Fee \$5.00/day

(rev. 20210124)

Date: \_\_\_\_\_ (Day Guest Enters the Range)

I UNDERSTAND THAT BY SIGNING THIS FORM I WILL BECOME A GUEST OF THE SWFSA FOR ONE DAY ONLY, AS DATED ABOVE, AND THAT I WILL HAVE THE PRIVILEGE OF VISITING AND/OR SHOOTING AT THE SWFSA RANGE FOR THAT DAY ONLY.

I ALSO UNDERSTAND THAT I MUST BE ACCOMPANIED BY A SPONSORING CLUB MEMBER AND THAT THERE ARE NO OTHER PRIVILEGES ASSOCIATED WITH THIS "GUEST AGREEMENT".

I WILL HOLD HARMLESS SWFSA AND ITS' OFFICERS FROM ALL LIABILITY FOR PERSONAL INJURIES OR PROPERTY DAMAGE INCURRED BY ME DURING THE EXERCISE OF THIS PRIVILEGE ON SWFSA PROPERTY. SWFSA HOLD HARMLESS AGREEMENT APPLIES TO THIS GUEST PASS.

I WILL ALSO BE RESPONSIBLE FOR ALL DAMAGES CAUSED BY ME TO SWFSA PROPERTY.

Guest Signature: \_\_\_\_\_

## Guest Information

PLEASE PRINT

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

APT. #: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIPCODE: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_

Sponsoring Member Signature: \_\_\_\_\_

Sponsoring Member Print: \_\_\_\_\_

### ***SPONSOR Directions:***

Option #1 - Sponsor drop the completed form and cash/check in the mail slot located in between Bay 4 & 5 where indicated.

Option #2 - Sponsor mail this completed form with cash/check at the end of the day to the Club Treasurer; S.W.F.S.A. P.O. BOX 100691 CAPE CORAL, FL. 33910