



Piedmont Regulators Match Registration and Release Form

Today's Date _____ Posse # _____ Amount Paid _____

Are you a member of the Piedmont Regulators? _____ Are you a member of the GMSA? _____

Name _____

Street Address _____

City _____ State _____ Zip _____

Phone _____ Date of Birth _____ NRA Member? _____

Email Address _____

SASS Alias _____ SASS # _____

Shooting Category
(choose from below) _____

SASS Categories (choose one)

49'er (49r), Buckarett (BR), Buckaroo (BH), B-Western (BW), Classic Cowboy (CCB), Classic Cowgirl (CCG), Cowboy (COW), Cowgirl (COWG), Duelist (MD), Double Duelist, Elder Statesman (ES), F.C. Duelist (FCD), Frontier Cartridge (FC), Frontiersman (FM), Grand Dame (GD), Greenhorn (No SASS #)(GH), GunFighter (GF), Junior (JR), Junior Girl (JG), Ladies 49'er (L49), Ladies B-Western (LBW), Ladies Duelist (LD), Ladies F.C. Duelist (LFD), Ladies Frontier Cartridge (LFC), Ladies Gunfighter (LG), Ladies Outlaw (LOL), Ladies Senior (LS), Ladies Silver Senior (LSS), Ladies Wrangler (LW), Outlaw (OL), Senior (MS), Senior Duelist (SD), Senior Gunfighter (SG), Shootist (SH), Silver Senior (SS), Wrangler (WRA)

RELEASE OF LIABILITY

READ CAREFULLY – THIS EFFECTS YOUR LEGAL RIGHTS

In exchange for participation in the shooting sports organized by the Georgia Mountain Shooting Association ("GMSA"), of 291 Oakway Drive, Eastanollee Georgia, 30538 and / or use of the property, facilities and services of GMSA, I agree for myself and (if applicable) for the members of my family to the following:

1. I agree to observe and obey all posted rules and warnings, and further agree to follow any oral instructions or directions given by GMSA, or the representatives or agents of GMSA.
2. I recognize that there are certain inherent risks associated with the above discharging of a firearm and I assume full responsibility for personal injury to myself and if applicable, my family members, and further release and discharge GMSA for injury, loss or damage arising out of my or my family's use or presence upon the facilities of GMSA, whether caused by the fault of myself, my family, GMSA or other third parties.
3. I agree to indemnify and defend GMSA against all claims, caused of action, damages, judgments, costs or expenses, including attorney fees and other litigation costs, which may in any way arise from my or my family's use of or presence upon the facilities of GMSA.
4. I agree to pay for all Damages to the facilities of GMSA caused by me or my family's actions.
5. Any legal or equitable claim that may arise from participation in the above shall be resolved under Georgia law.

I HAVE READ THIS DOCUMENT AND UNDERSTAND IT. IFURTHER UNDERSTAND THAN BY SIGNING THIS RELEASE I VOLUNTARILY SURRENDER CERTAIN LEGAL RIGHTS.

Printed Name: _____

Signature: _____

Print name of Parent/ Legal Guardian and Sign (Required if participant is under age of 18)