



New Haven Sportsman's Club

Membership Application 2020



Please fill out this form electronically (Adobe Reader required) and e-mail the completed form to: NHSC.Membership.Chairman@gmail.com – DO NOT PRINT OR SCAN THIS APPLICATION Paper copies <u>will not</u> be processed!					Date Received:	
					Processed by:	
I hereby apply for membership in The New Haven Sportsman's Club. If accepted I will abide by the club's by-laws and regulations and will loyally support the club in its work and endeavors.						
Applicant's Information						
Applicant's last name:		First:		Middle:	Title:	Date of Birth: MM/DD/YYYY
Street Address:					US Citizen? Yes: No:	
City:		State:		Zip Code:	Number of Years:	
Occupation:	Employer:		How Long?	E-mail Address:		
Home Phone:		Cell Phone:		Emergency # (other than yourself):		
Marital Status (select ONE): Single Married Divorced Separated Widowed					No. of children younger than 18:	
Pistol Permit and other relevant history						
Do you hold a CT pistol Permit?		Yes:	No:	Permit #:		Military Service: Yes: No:
Do you hold a CT Long Gun Permit?		Yes:	No:	Permit #:		Branch:
Do you hold an out of state permit?		Yes:	No:	If Yes, for what states:		Discharge:
Have you ever been denied a pistol/long gun permit or had one suspended or revoked?					Yes:	No:
If YES, please explain why?						
Do you hold a CT Hunting / Fishing / Trapping license?			Yes:	No:	License #	
Has your Hunting / Fishing / Trapping license ever been suspended or revoked?					Yes:	No:
If YES, please explain why?						
Nation Rifle Association Membership Type		Annual	Multi Year	Life	N.R.A. #	
NOTE: ALL NHSC MEMBERS MUST BE MEMBERS OF THE NRA					Expiration Date:	
What similar clubs do you belong to?						
Criminal Background						
Have you ever been arrested for anything other than motor vehicle infractions?			Yes:	No:	If YES, please explain below:	
Have you ever been convicted of a felony?			Yes:	No:	If YES, please explain below:	
Have you ever been convicted of a misdemeanor crime of domestic violence?			Yes:	No:	If YES, please explain below:	
Are you subject to a restraining order?			Yes:	No:	If YES, please explain below:	

Visit us at: www.nhsc.us
Tel 203-457-9901: 4158 Durham Rd, Guilford, CT 06437



New Haven Sportsman's Club

Membership Application 2020



Fees and Orientation

After a candidate has completed their indoor range, outdoor range and house & grounds orientation the membership will vote on their application during a regular monthly meeting upon which the probationary member will receive an ID card and electronic key FOB. After no less than 12 months the membership will vote upon recommendation by the executive board whether the member should be accepted as a full member.

Fees for your first year include:

	One-time initiation fee:	\$600.00
	Membership dues:	\$
	Electronic Key Fee:	\$10.00
Capital Assessments (\$600 - \$100 a year due with membership fees):		\$
	Connecticut Dues Tax:	\$

	Grand Total:	\$
--	---------------------	----

Payment Received by:	Cash:	Check:	Please indicate Check # or Cash Receipt #:
----------------------	-------	--------	--

Acknowledgement of Receipt of Club Rules & Regulations and By-laws – Declaration

Failure to abide by club rules, regulations and by-laws may result in disciplinary action up to and including dismissal from the New Haven Sportsman's Club. I further understand that any false statements on my membership application are grounds for immediate dismissal. In addition, should my membership be terminated for just cause or if I cancel my membership, **I will forfeit all monies paid to the New Haven Sportsman's Club including membership, assessments and initiation fees.**

All members are required to devote a minimum of five (5) hours per year to the club work program for upkeep and maintenance of the ranges, grounds and club house. If not, you will be assessed an additional \$200.00 on your annual dues. No credit is given for partial work hours that add up to less than five (5) hours over the whole year. Work hours need to be completed by the annual meeting in December. I hereby acknowledge the receipt of the club rules & regulations as well as by-laws. Furthermore, I have reviewed and understand these rules and regulations.

I hereby acknowledge that as a probationary and full member of New Haven Sportsman's Club I will abide by all federal and Connecticut laws concerning the possession and transportation of firearms. Furthermore, all information furnished in this application is true to the best of my knowledge.

Applicant's Signature:	Date:		
Witness Signature:	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"><u>Witness Name (please print):</u></td> <td style="width: 40%;">Date:</td> </tr> </table>	<u>Witness Name (please print):</u>	Date:
<u>Witness Name (please print):</u>	Date:		

For Office Use Only:

Post-Orientation Interview:	Date:	Membership Chairman:
Orientation by: (Print Name)	Date:	Instructor Sign:

Visit us at: www.nhsc.us
 Tel 203-457-9901: 4158 Durham Rd, Guilford, CT 06437



New Haven Sportsman's Club



Liability Release, Indemnity Agreement & Code of Conduct

1. I acknowledge that shooting and its related activities are HAZARDOUS and can result in damage, injury and/or death. I have considered this and have made a voluntary choice to participate in these activities despite the risk that are present. In consideration for being permitted to participate, I agree to ASSUME ANY AND ALL RISKS OF DAMAGE, INJURY AND/OR DEATH which might be associated with or result from my participation in these activities.
2. In consideration of my participation in the activities sponsored by and held at the New Haven Sportsman's Club (NHSC), I hereby RELEASE FROM LIABILITY, AND AGREE TO INDEMNIFY AND HOLD HARMLESS, AND TO FOREVER DISCHARGE, the organizers and sponsors of these activities and the following parties:
 - a. The New Haven Sportsman's Club, Inc. (NHSC)
 - b. its officers,
 from any and all responsibility, liability, claims and demands whatsoever for any damages, loss expense, delay, injury, sickness, accident, and/or death, whether caused by negligence, or any other reason. This agreement applies to ALL activities that are in ANY WAY CONNECTED with my membership or participation in the NHSC activities.
3. I have carefully read and understand this agreement and all of its terms. I understand that this agreement is a release of liability that will legally PREVENT me or any other person from filing suit or making any other legal claim arising out of or related to my membership or participation in NHSC activities. I nevertheless enter into this agreement freely and voluntary and agree that it is binding upon me, my relatives, heirs, administrators, executors, and legal representatives.
4. While it would be impossible to list all prohibited conduct, the following standards are reasonable and necessary for proper conduct for members and guests at any NHSC activity. I acknowledge that the NHSC will not tolerate the following actions and has the right to revoke my NHSC membership if I do not comply with this code of conduct during NHSC activities.
 - a. Any act in violation of federal, state, county, or local, civil or penal laws or statutes.
 - i. Any use or possession of narcotics or illegal drugs while attending a NHSC activity.
 - ii. Any act of providing alcoholic beverages to club members, family members, or guests under the legal drinking age in attendance at NHSC activities.
 - iii. Any act that may create a dangerous situation, such as verbal, physically or sexually assaulting another individual.
 - b. Any act of dishonesty, theft, or misappropriation of NHSC, member or guest property.
 - c. Any issuance of a check to the NHSC that is returned for non-sufficient funds that is not rectified within 30 days.
 - d. Any use of the NHSC, name, logo, or reputation for personal gain.
 - e. Any actions or behavior that will in any way reflect poorly on the public image of the NHSC.

Disciplinary action will be at the discretion of the NHSC membership upon recommendation by the executive board. The action may include a written warning, suspension of NHSC privileges, or termination of membership.

Signature of Applicant	Date:
Printed Name of Applicant	
Signature of Parent or Guardian (if under 18)	Date:
Printed Name of Parent or Guardian (if under 18)	
Membership Chairman or representative that verified CT Driver's License and witnessed Signing	Date:
Printed Name of Membership Chairman (Witness)	

Driver's license #:	Expiration Date: UU)) ' ' ' ' .
-------------------------------------	---