

# Membership Application

NAME: \_\_\_\_\_ ALIAS: \_\_\_\_\_ D.O.B: \_\_\_\_\_

FAMILY MEMBERS(family membership only): \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP \_\_\_\_\_

E-MAIL \_\_\_\_\_ HOME#: (\_\_\_\_) \_\_\_\_\_ CELL#:(\_\_\_\_) \_\_\_\_\_

UMS# \_\_\_\_\_ SASS# \_\_\_\_\_ CLASS/LEVEL \_\_\_\_\_

Island Long Riders Membership	Cost (select one)	Amount Enclosed
<b>New Member</b>	Individual: \$25	
	Family: \$35	
<b>Current Member Renewal</b>	Individual: \$20	
	Family: \$30	
The Island Long Riders, Inc. is a UMS (United Mounted Shooters) affiliated club. <b>UMS membership is separate from membership in The Island Long Riders.</b> Participants in local UMS events are required to hold current UMS membership. Visit <a href="http://www.unitedmountedshooters.com">www.unitedmountedshooters.com</a> for details.		<b>TOTAL AMOUNT:</b>

**Membership Benefits:** As a member, you will receive regular news letters and/or e-mails, match results, and advance notice of registration for upcoming shoots. . You will enjoy the sport and help promote GUN SAFETY as well as being a part of a family friendly sport.

**Liability Release:**

I understand that I am participating in a sport which contains dangers, and risks may arise, including, but not limited to, accidental injury, the forces of nature and illness. In consideration of the right to participate in these events and the services provided for me by The Island Long Riders, Inc, UMS and its agents, I have and do hereby assume the risks associated with such events. The contestant shall at his own expense, defend management and/or all sponsors, their members, or employees from any and all such claims and indemnify, from any and all liability, damage and costs arising from injuries to person or property occasioned by any act or omission of the contestant.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

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**SEND COMPLETED FORM AND PAYMENT TO:**  
**JOE MUGNAI, 381 CARNATION DRIVE, FARMINGDALE, NY 11735**