



## IPSC ALBERTA 2020 Membership Application

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Gender: M\_\_\_ F\_\_\_ Practiscore First Name (if different): \_\_\_\_\_

Address: \_\_\_\_\_

City / Town: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth:(dd-mmm-yy) \_\_\_\_\_ IPSC Alberta Alias: \_\_\_\_\_

Range Officer Status: RO \_\_\_ CRO \_\_\_ RM \_\_\_ BBI\_\_\_ Not a RO \_\_\_

**Membership Fee:** (check appropriate line)

Individual Member (\$70): \_\_\_\_\_

Family Member (\$120) \_\_\_\_\_ (2 members same residence)

Family Member (\$140) \_\_\_\_\_ (3 or more members same residence)

Junior Member (\$50) \_\_\_\_\_ (Under 18yrs of age)

***August 1, 2020 or later, membership is 50% of applicable fee rate above.***

***Please make cheques or EMT's payable to IPSC Association of Alberta***

***EMT's send to: [membership@ipsicalberta.com](mailto:membership@ipsicalberta.com)***

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### **DISCLAIMER**

I agree by my signature below, to abide by the rules of IPSC and to save blameless the Board of Directors of IPSC Alberta, Match Directors, Range Officers and/or designated officials in the event of injury or bodily harm while attending or participating in IPSC Alberta sanctioned events. I am fully aware that I am participating of my own free will and assume **All Liability or Risk** to myself.

Date Signed: \_\_\_\_\_

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