



IPSC ALBERTA 2018 Membership Application

Name: _____ Gender: M___ F___

Address: _____

City / Town: _____ Postal Code: _____

Telephone #: _____ Email: _____

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

Range Officer Status: RO ___ CRO ___ RM ___ Not an RO ___

Membership Fee: (check appropriate line)

Individual Member (\$70): _____

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

Family Member (\$130) _____ (3 or more members same residence)

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

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

Mailing Address: PO Box 1036, Bassano, AB T0J 0B0

EMT's emailed to: membership@ipscalberta.com

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**.

Date Signed: _____

Signature: _____