



2022 SASS GEORGIA STATE BLACK POWDER MATCH

Thursday, May 19, 2022

South River Gun Club, 5205 GA Hwy 212, Covington, GA 30016 - **GPS Coordinates** 33.504343, -83.984286
Please fill out an application for each shooter.

Name _____ Alias _____ SASS # _____

Address _____ City _____ State _____ Zip _____

Phone # _____ Email _____

STATE BLACKPOWDER MATCH CATEGORIES

- | | |
|---|---|
| <input type="radio"/> Buckaroo / Buckarett
(13 & Under) | <input type="radio"/> El Patron/La Patrona
(80+) |
| <input type="radio"/> Junior (14-16) | <input type="radio"/> Duelist |
| <input type="radio"/> Cowboy / Cowgirl (17+) | <input type="radio"/> Senior Duelist (60+) |
| <input type="radio"/> Wrangler (36+) | <input type="radio"/> Gunfighter |
| <input type="radio"/> Forty Niner (49+) | <input type="radio"/> Senior Gunfighter (60+) |
| <input type="radio"/> Senior (60+) | <input type="radio"/> Frontiersman |
| <input type="radio"/> Silver Senior (65+) | <input type="radio"/> Outlaw |
| <input type="radio"/> Elder Statesman / Grand
Dame (70+) | <input type="radio"/> Male |
| <input type="radio"/> Cattle Baron / Baroness
(75+) | <input type="radio"/> Female |

COSTS		
Qty		Price
	BP Match with Main Match	\$50
	BP Match Only	\$75
Total Amount		
Check Number		

The match will be 5 stages and SASS rules apply. **You must be a current SASS member to shoot.**
This is a **cold range**. **No alcoholic beverages** are allowed on the range at any time but are allowed in the
camping areas only after shooting has ended for the day.

Make checks payable to: **South River Gun Club**

Mail completed applications with signed release and payment to:

Greg Broussard, 337 Elder Drive, Jefferson GA 30549

For current match information and details please check the GA state match website at www.srscowboy.com.

Questions? For match information contact *Fast Eddie* at 404-405-8266 or email at fasteddie76308@hotmail.com.

For registration information contact *Krazy Kajun* at 706-654-8109 or email at krazy_kajun@aol.com.

WAIVER OF LIABILITY; INDEMNIFICATION AGREEMENT AND COVENANT NOT TO SUE

NOTICE: THIS IS A LEGALLY BINDING AGREEMENT. BY SIGNING THIS AGREEMENT, YOU GIVE UP YOUR RIGHT TO BRING A COURT ACTION TO RECOVER COMPENSATION OR OBTAIN ANY OTHER REMEDY FOR INJURIES TO YOURSELF OR YOUR PROPERTY ARISING OUT OF YOUR USE OF SOUTH RIVER GUN CLUB, INC. NOW OR ANY TIME IN THE FUTURE.

I, the undersigned user, hereby acknowledge and agree that target shooting, the use of firearms and the use of the South River Gun Club, Inc. facilities located in Newton County, Georgia ("SRGC") may be dangerous and may involve the risk of serious bodily injury. I have full knowledge of the nature and extent of all of the risks associated with the use of the SRGC facilities, including, but not limited to: (1) all manner of injury, including, but not limited to death and/or paralysis, arising from target shooting, the use of firearms or their discharge; (2) injuries resulting from intentional or inadvertent discharge of firearms by myself or others using the SRGC facilities, including loss of hearing, burns, blindness, or other injury; (3) injuries resulting from explosions, contact with projectiles and hardware; and (4) failure or misuse of any equipment, whether owned and maintained by SRGC or otherwise. I have been encouraged to use vision and hearing protection at all times when present on the facilities of SRGC. If I choose not to use such protection, I agree to assume the additional risks associated with lack of their use. I acknowledge that the above list is not inclusive of all the possible risks associated with my use of SRGC and that the above list in no way limits the extent of this **Waiver of Liability/Indemnification Agreement and Covenant Not to Sue**.

In consideration of my use of SRGC, I agree to release and, on behalf of myself, my heirs, representatives, executors, administrators and assigns (the "Releasers"), **HEREBY DO RELEASE** SRGC, its owners, shareholders, officers, directors, employees and agents (the "SRGC Releasees") from any cause of action, claim, or demand of any nature whatsoever (except for their gross negligence or willful misconduct) which the Releasers may now have or have in the future against the SRGC Releasees on account of personal injury, property damage, death or accident of any kind, arising out of or in any way related to my use of SRGC, whether that use is supervised or unsupervised, and however the injury or damage is caused, including but not limited to the negligence of the SRGC Releasees. I further covenant that I shall bring no civil action against the SRGC Releasees based upon any of the foregoing. I understand that I will be solely responsible for any loss or damage including, but not limited to, death or paralysis, that I may sustain while using SRGC and that by signing this Agreement, I am relieving the SRGC Releasees of any and all liability for such loss, damage or death (other than as a result of their gross negligence or intentional misconduct).

I do hereby further agree to **INDEMNIFY AND HOLD HARMLESS** the SRGC Releasees from any and all causes of action, claims, demands, losses or costs of any nature whatsoever (except for those resulting from the gross negligence or willful misconduct of the SRGC Releasees) arising out of or in any way relating to my use of SRGC (excluding any violation of environmental laws). I further certify that I am in good health and that I have no physical limitations that would preclude my safe use of SRGC.

I acknowledge that the foregoing agreement is intended to be as broad and inclusive as permitted by the law of the State of Georgia and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full force and effect. I understand that the terms of this agreement are legally binding and that I am signing this agreement, after having carefully read it, of my own free will.

IN WITNESS WHEREOF, I have executed this agreement this _____ day of _____, 20_____.

User Signature _____ Date of Birth _____

Name (Print): _____ Age _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Emergency Contact Name _____ Phone _____

If User is under 18 years old: Parent/Guardian Consent

I, as parent or guardian of the above minor under 18 years of age, hereby consent, on behalf of the said minor, to the terms and conditions set forth in this **Waiver of Liability; Indemnification Agreement and Covenant Not To Sue**.

Parent/Guardian Signature _____