## 2024 SGC Agency/ Corporate Membership Application

Corporate and Agency memberships in the Snowshoe Gun Club do not have the same privileges as General Memberships. It is important for Corporations and Law Enforcement Agencies to note and abide by the following addendum to the General Membership rules.

- ALL group range time for training purposes must be scheduled. For purposes of this policy, a group is considered to be (2) or more personnel. SGC requires that law enforcement and other organizations schedule their range use for training 30 days in advance. SGC will attempt to accommodate any reservation requests made on short notice (less than 30 days), however, reservations requested on short notice cannot be guaranteed and use will be on a 'first come first serve' basis. Short notice use of the range will not supersede other events or Family Membership use of the facilities. ANY unscheduled group use of range facilities will be considered a violation of the range use and reservation policies. To make a reservation please download the request form at <a href="http://www.snowshoegunclub.com/Make-a-Reservation on.html">http://www.snowshoegunclub.com/Make-a-Reservation on.html</a> and follow the instructions listed there.
  - Proof of insurance is required <u>prior</u> to range use.

Government Agency Name - Agency Membershin \$500 (3 Keys)

Corporate and Agency range keys are NOT for personal use. Any individual or group that is using SGC facilities for training purposes MUST be authorized to do so by their respective organization, and their organization be made aware of the time in which the training is taking place. This is critical for insurance compliance. Personal use of a Corporate or Agency range key or accessing SGC facilities other than outlined in SGC policy and Standard Operating Procedure is forbidden and is considered a trespass.
Agency members that wish to train on their own time may apply for a Family Membership and their own key to maintain insurance compliance.

Tagency Name Agency Member	ocisinp 4000 (o rega)	
Corporate Name - Corporate Membership\$350 (2 Keys)		
Corporate Membership - Name of (2) Employee's	Responsible for SGC Keys and Access:	_
	Contact Phone	
	Contact Phone	
Provide information belo	elow for both Corporate and Agency Membership	
☐ Insurance Information attached (Membership i	is not valid until Insurance information is received by SGC.)	
Mailing Address:		
City:State	te:Zip:	
Contact Phone	PO – INVOICE #	
$\hfill \square$ I agree on my organization's behalf to abide by noted above.	by, the SGC Range Safety Rules and Corporate /Agency add	dendum as
Printed Name of Agency - Corporate Authorized	d Agent:	
Signature:	Date:	
Email Address:		

The personal information collected is only used by SGC Directors for the purposes defined at the time of the collection or a use that complies with these purposes. We do not share your information with any third parties.