



# Linea de Fuego

**USPSA / IPSC**

**ANNUAL MEMBERSHIP**

**Membership of 12 months from Receipt<sup>1</sup>**

## **LdF Members Receive**

- Reduced Match fees.
- Competition in the Trophy Chase
- Club Liability insurance
- LdF is committed to consistently produce quality matches.

## **Membership**

Individual membership fee:

**\$100.00**

Complete an individual application for each family member. Mail completed application, with payment, to the LdF Membership Coordinator.

## **Send the completed application to:**

**Brian Gaynor  
6439 Ruby Way  
Carlsbad, CA 92011**

---

<sup>1</sup> Members whose membership is overdue by six or fewer months will have their renewal back-dated to the date of expiration unless they requests otherwise.

# LDF LIABILITY RELEASE AND AGREEMENT

Date	_____
Check #	_____
Amount	_____

Please Print Legibly

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ NROI: \_\_\_ RO \_\_\_ CRO \_\_\_ RM

Email: \_\_\_\_\_ USPSA #: \_\_\_\_\_

I (print name) \_\_\_\_\_, age \_\_\_\_\_, in consideration of becoming a Member of **Linea De Fuego, a California Nonprofit Mutual Benefit Corporation**, do hereby release the **Linea De Fuego**, including its members, directors, agents or officials from all liability which may arise out of any loss, injuries or death to myself, my property or properties accompanying me while en-route to or from, during participation in and the premises where any of the club events and/or social activity occurs. I am aware of the risks and hazards that coincide with participation in such events.

I acknowledge, as a competitor, that I and guest or visitor of mine who demonstrates an inability to act in accordance with principals of USPSA will be instructed to leave the range immediately and that I may be disqualified from a participation in the club event.

I further agree to abide by all safety regulations and rules of USPSA/IPSC and understand that failure to do so will result in release from the club.

I have read the **LIABILITY RELEASE** and I agree:

- 1) To assume personal responsibility,
- 2) To assume the risks herein,
- 3) To waive any rights of action against the principals, on behalf of my self, my heirs, next of kin, executors, and /or administrators,
- 4) According to the legal requirements of the United States and the State of California, are you able to purchase and possess firearms?

YES \_\_\_\_\_ NO \_\_\_\_\_

\_\_\_\_\_  
Signature Date

## CONSENT FOR POSSESSION OF HANDGUN BY A JUVENILE

I, \_\_\_\_\_, am the parent / guardian (circle one) of \_\_\_\_\_, a juvenile whose date of birth is \_\_\_\_\_,

I certify that applicable Federal, State or local law does not prohibit me from possessing a handgun or ammunition. I do hereby give my permission for \_\_\_\_\_ to temporarily possess and transport handguns and ammunition to the fullest extent not prohibited by law, including but not limited to temporary possession of handguns and ammunition while participating in United States Practical Shooting Association events and similar practical shooting events and traveling to and from such events.

\_\_\_\_\_  
Signature of parent or guardian Date