

Application for membership to the BAY CITY BOWMEN CLUB for the year of _____

(Form revised 12/09/2025)

Make checks payable to: Bay City Bowmen

Mailing Address: Bay City Bowmen's Club, 2245 8 Mile Rd, Kawkawlin, MI 48631

BAY CITY BOWMEN MEMBERSHIP FORM

(PLEASE PRINT YOUR INFORMATION **NEATLY**)

Application for membership in the Bay City Bowmen shall be considered by the Board of Directors at the monthly meeting. Money must accompany this application.

NAME _____ AGE _____

SPOUSE'S NAME _____ ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

PHONE _____ E-MAIL _____

HOW MAY WE USE YOUR E-MAIL? BULLETIN ONLY () OR ALL CLUB INFORMATION ()

NAME OF CHILDREN UNDER 18 _____

1. Have you ever been charged with, or convicted of any game law violation? YES, or NO?
2. Have you ever been expelled from/or denied membership in any Archery Club or other organization? YES, or NO?
3. Do you now belong to any other Archery Club? YES, or NO?
4. What is your primary shooting interest? Tournament | Bow hunting | Both

Please select the appropriate category below:

- () New Member Rate (first year): \$75
- () General Renewal Rate: \$100 (8 hours not worked)
- () General Renewal Rate: \$50 (8 hours worked)
- () Senior Rate (60 and older): \$25
- () Youth (17 and under): \$25
- () Young Adults (18 – 25) Rate: \$35
- () Lifetime Members: \$0 (Free)

For an additional \$50 you may purchase a key to the clubhouse to shoot indoors. () Yes I would like a key to the clubhouse. \$50 (this is to be paid annually)

REFERENCES _____

SIGNATURE OF APPLICANT _____ DATE _____

PARENT'S SIGNATURE FOR JUNIOR APPLICANTS _____

(OFFICE USE ONLY)

BOARD ACTION _____ DATE _____ Form revised 12/09/2025

TREASURER'S RECEIPT NUMBER _____ DATE _____

MEMBERSHIP PACKET SENT _____ DATE _____

CARD SENT _____ ENTERED _____ EMAIL UPDATED _____

----- CUT OFF ON THIS LINE -----

RECEIPT FROM THE BAY CITY BOWMEN CLUB

RECEIVED FROM _____ AMOUNT \$ _____

RECEIVED BY _____ DATE _____

IF YOU DO NOT RECEIVE YOUR MEMBERSHIP CARD WITHIN 30 DAYS CONTACT CLUB SECRETARY

Bay City Bowmen

Waiver and Release of Liability

1. By signing this Waiver and Release of Liability Agreement), I waive and release Bay City Bowmen, its agents, servants, employees, insurers, successors and assigns from any and all claims, demands, causes of action, damages or suits at law and equity of any kind, including but not limited to claims for personal injury, property damage, medical expenses, loss of services, on account of or in any way related to or growing out of my or my child's presence or involvement at the facility.

This waiver and release is intended to and does release Bay City Bowmen from any and all liability for damages or injuries on account of or in any way related to or growing out of my or my child's negligence, the negligence of third parties and Bay City Bowmen's negligence. This is not intended to release Bay City Bowmen from any liability resulting from their intentional conduct.

I further covenant and agree not to institute any claims or legal action against Bay City Bowmen for any claim released by this Agreement. I further agree that should any claim be made against Bay City Bowmen in contravention of this Agreement, including but not limited to derivative claims, I will protect, defend and completely indemnify (reimburse) Bay City Bowmen for any such claim and expenses including attorney's fees and costs incurred by Bay City Bowmen in defending themselves or security indemnity hereunder.

2. I understand that Bay City Bowmen is not responsible for any lost, stolen, or damaged valuables or property.
3. I acknowledge that I have received and read a copy of the current rules and regulations governing the use of the facility. I agree that I and my child will fully comply with all rules and regulations and with any amendments.

I have read the Agreement and understand that by signing the Agreement I have consented to be bound by its terms, including the waiver/release of any legal right I may have to sue Bay City Bowmen for any costs they incur because a claim or legal action is brought in violation of this agreement. I agree any violation of the Agreement and its terms and conditions, as determined by Bay City Bowmen, will void, and terminate this Agreement and may result in loss of the ability to use the facility.

I am signing this Agreement freely, voluntarily, and competently and am at least eighteen (18) years of age.

Member Name (please print) _____

Signature of Member _____ Date _____

Signature of Spouse _____ Date _____

Minor Member's Name(s) (please print) _____