



JUNIOR RA Gun Club Membership Application

2451 Riverside Drive, Ottawa, Ontario K1H 7X7

Tel: 613-733-5100

Web: www.racentre.com

RACentreOttawa

Please select one. New Member
 Renewing Member

Please select one. Safety course required
 Safety course completed

MEMBER INFORMATION - PLEASE PRINT CLEARLY

Family Name: _____ Given Name: _____

Date of Birth (M/D/YR): _____ RA Number: _____

Address: _____ Street: _____

City: _____ Prov: _____ Postal Code: _____

Home/Cell Phone #: _____ E-mail Address: _____

PARENT/GUARDIAN INFORMATION - PLEASE PRINT CLEARLY

Family Name: _____ Given Name: _____

Home/Cell Phone #: _____ E-mail Address: _____

Relationship to Member: _____

Your privacy is important to us and your information will be utilized for official Gun Club and the Recreation Association of the Public Service of Canada (RA) business only. A copy of our privacy policy is available at www.racentre.com/policies or from our Privacy Officer. Information gathered is to ensure compliance with the Firearms Act.

FIREARMS LICENSE (PAL - Possession and Acquisition License)

- I am a new member and do not yet have my Firearms License. Junior Members are not required to complete PAL, but it is highly recommended. An internal safety course is required (no fee).
- I only use air pistols and/or air rifles, and therefore do not require a Firearms License.
- I currently have my Firearms License (PAL - Possession & Acquisition License)

Firearms License #: _____ Expiry Date: _____

If license is pending, provide the following information.

Date you took Firearms License Course: _____ Location/Instructor: _____

Date you mailed (PAL- Possession and Acquisition License) application to RCMP: _____

ALL MEMBERS - FIREARMS LICENSE (PAL - Possession and Acquisition License)

NEW MEMBERS (Date of Birth required as per Firearms Act if you do not yet have a Firearms License)

Members who do not currently have a Firearms License (PAL- Possession and Acquisition License) can join the Club and may shoot under the direct supervision of a licensed member.

Direct supervision for those without a valid Firearm License (PAL- Possession and Acquisition License), is a requirement of the Firearms Act. Please be aware this supervision is provided by volunteers and the club cannot provide 1:1 supervision for an indefinite period of time. Shooting limitations may occur pending the availability of licensed members.

The RA Centre offers Firearms License Courses. Visit www.racentre.com or contact Guest Services for details.

Signature _____ Date _____
(Month, Day, Year)

OFFICE USE:

Application & payment received by: _____ Date: _____
(RA staff initials) (Month, Day, Year)

Informed Consent and Waiver

Thank you for choosing to join the RA Gun Club and its facilities services and programs (“Activities”) of the Club. We request that your understanding and cooperation in maintaining both your and our safety and health by reading and signing the following informed consent agreement.

I, _____ declare that there are various risks involved with my participation in shooting activities at the RA Gun Club. In order to participate in the RA Gun Club activities I acknowledge (by checking the boxes below):

- I have read and understand the RA Gun Club Range Operating and Safety procedures and agree to abide by these rules at all times. (See RA Gun Club website www.racentre.com/gun-club-member-page.)
- I certify that I am physically able and have not been advised against participation in these types of activities by a health professional. I hereby authorize emergency medical treatment in the event of injury or illness.
- I understand that range activity is governed by Range Officers who provide oversight to operations. I understand it is my responsibility to act in a safe manner while participating in RA Gun Club activities and at all times. I accept that Range Officers have the authority to immediately suspend my activity for any breach or suspected breach of any Gun Club rule and Regulation.
- I agree that, prior to participating in these activities, I will inspect facilities and equipment and, if I believe any are unsafe, I will immediately advise the Range Officer on duty.
- I am fully aware that there may be risks and hazards unknown to me connected with being on the premises and participating in activities, and I hereby elect to voluntarily enter the Range and engage in these activities knowing that conditions may become hazardous or dangerous to me and my property.
- I voluntarily assume full responsibility for any risk of loss, property damage or personal injury, including death, that may be sustained by me, or any loss or damage to property owned by me, as a result of my participation in these activities, whether caused by the negligence of myself, other participants or otherwise.
- I understand that risks include, but are not limited to, injuries or death caused by the following: gunshot; the negligence of other participants in the vicinity; faulty equipment, firearms or ammunition provided by myself or other participants; lighting conditions; excessive noise.
- I have been informed that the most prevalent environmental hazards related to shooting in an indoor gun range are exposure to lead and noise pollution. I accept that it is my sole responsibility to safe guard my own health which may include adopting best practices including undertaking tests for exposed to lead, and high noise levels.
- I understand that I must inform the RA immediately in the event that my firearms license or ATT is revoked or that I become the subject of a prohibition order or similar change in status that effects my ability to legally acquire, possess or be in close contact with firearms or ammunition. I understand that my membership privileges will be immediately suspended pending review.
- I understand that if I do not currently have a Firearms License (PAL- Possession and Acquisition License) I can join the Club and may shoot under the direct and immediate supervision of a licensed member. I also understand that my date of birth is required on my application as per Firearms Act. I also understand that direct supervision is a requirement of the Firearms Act. I recognize that this supervision is not always available therefore shooting limitations may occur pending the availability of licensed members.
- I understand that the RA collects personal information from me with the intent to fulfill their obligation to me. I agree with the RA's practice of keeping my personal information confidential and subject only to legal requirements to disclose information of legal exceptions (emergencies). I accept that the RA will use this information to improve the services that I receive. I also appreciate that the RA will not disclose, divulge or otherwise communicate to any person or business and such confidential information without my written consent to do so. Finally, I am aware that I can request the complete Privacy policy at any time by contacting the RA Privacy officer at 613-733-5100.

Disclaimer and Waiver

I agree to assume all risks involved in participation in the activities, programs and services of the Recreation Association of the Public Service of Canada (hereinafter referred to as the RA). The RA, or their directors, officers, employees, servants and agents are not responsible for any loss, damage or injury for any reason whatsoever suffered by me or any other person either before, during or after participation in activities, programs and services, whether held at this facility or at any other location. I do hereby agree for myself, my spouse, heirs, executors, administrators and assigns do release and forever discharge the RA, or their directors, officers, employees, servants or agents of any and all claims, demands, damages, costs, expenses, actions or causes of action whether in law or equity in respect of death, injury, loss or damage to person or property however caused, including but not limited to negligence arising or to arise out of my participation in such activities and programs.

I declare that I have read, understood and that I agree to the contents of this DISCLAIMER & WAIVER and release of liability in its entirety.

Member Signature

Date

Parent/Gaurdian Signature

Date