

S.P.A.A. RANGE RULES



YOUR MEMBERSHIP OR GUEST PRIVILEGES WILL BE TERMINATED FOR VIOLATION OF ANY OF THE FOLLOWING RANGE RULES, OR ANY COMMON SENSE SAFETY RULE WHETHER PRINTED OR NOT. THESE RULES APPLY TO GUESTS, VISITORS, AND COMPETITION SHOOTERS.

1. Members will meet their guests at the office and sign them in. Guests will leave with the member. **(ONLY ONE GUEST PER MEMBER).**
2. Firearms will be transported in a gun box, gun case, holster, or with the action open and muzzle pointed to the ground.
3. Load only when on the firing line and when there is no one down-range.
4. All guns will be emptied of ammunition, the action opened and placed on the counter and the shooter will stand clear of his/her weapon before ANYONE goes down-range or forward of the shooting positions.
5. Fire only from the firing line.
6. Shoot only at approved targets while on target holders.
7. When finished, return target backer to storage area.
8. Clean up your firing point after shooting.
9. Quick-draw shooting is **PROHIBITED**.
10. Children will remain quiet and under constant supervision.
11. Handguns will be fired only on the pistol range.
12. Rifles will be fired only on the rifle range, with the exception that handgun caliber rifles may be fired on the pistol range. Rifle shooters will be **PROHIBITED** from loading more than one round at a time in the weapon. Handguns chambered for rifle calibers may be fired on the rifle range
13. Use of armor piercing and tracer ammunition is **PROHIBITED**.
14. Shotguns will be fired only on the trap range. Low base shells with 8 shot size or smaller must be used. **NO HUNTING OR COMBAT LOADS MAY BE USED.**
15. **ALL SALES ARE FINAL** - be sure before you buy.
16. Alcoholic beverages are **PROHIBITED** on the range.
17. Range speed limit is **10** miles per hour.
18. **THE RANGE OFFICE DECISION IS FINAL.** Your guest's violation is your violation. Non-commercial advice on firearms, minor or emergency gun adjustments and assistance on shooting techniques may be handled by Range Officers.

RELEASE OF CRIMINAL RECORD INFORMATION



I, _____ Born on ____/____/____
Name (print or type) month day year

in _____
City County State

do hereby authorize the Seattle Police Athletic Association, Inc. to check with any law enforcement agency for any criminal record they have recorded against me.

I further authorize the law enforcement agency to give any information they have regarding my police record to the Seattle Police Athletic Association, Inc. I hereby release the law enforcement agency and the Seattle Police Athletic Association, Inc. and their agents from any liability whatsoever which might occur as the result of the release of these records pursuant to this authorization.

Signature

Subscribed and sworn to before me on this ____ day of ____ A.D. 20____
day month year

Notary Public in and for the State of Washington

Residing at: City/State

Seattle Police Athletic Association

SPAA AGREEMENT AND RELEASE FROM LIABILITY



IN CONSIDERATION of being permitted to enter the SPAA properties and shooting ranges for any purpose, including, but not limited to observation, use of facilities or equipment or participation in any way, the undersigned hereby agrees to the following:

I agree to indemnify, defend, hold harmless and release the SPAA, its elected and appointed officers, agents, employees, and volunteers from any and all lawsuits, damages, claims, judgments, losses, liability or expenses arising out of (1) the death or personal injury or property damage to, myself, my child or my ward, which may be sustained while using property or equipment owned by or under the control of the SPAA, or while participating in any activity sponsored by the SPAA or any other organization, or (2) any death or injury which results or increases by any action taken to medically treat me. All of the terms above shall apply whether or not caused by the alleged negligence, whether active or passive, or any acts or omissions of the SPAA, or any of its elected or appointed officers, agents, employees or volunteers.

I also understand that the SPAA does not carry insurance to cover participants in the activities in which I participate in. I understand there are risks associated with these activities, and I assume the risk of any injuries that I may sustain during any of these activities.

I sign this statement below, because:

- I know that all of the activities at the SPAA range facility may be hazardous;
- I know there is the risk of injury or death if I participate in any of these activities;
- I voluntarily participate in the activities of the SPAA, and I sign my name below so that I may participate - I can choose not to sign this agreement by choosing not to participate;
- I agree that if anything happens to me while participating, including injury or death, I release the SPAA and any of its employees from liability; and
- If I am injured while participating, I agree that anyone who provides medical assistance shall not be liable if they cause my death, increase my injury or cause additional injury.

I have read, understand and approve this RELEASE FROM LIABILITY. If the participant is a minor the undersigned parent or legal guardian warrants and represents that this RELEASE, its significance and the assumption of risk has been explained to and understood by my minor child or ward. I hereby declare, under penalty of perjury, that I am the parent or legal guardian of the named participant.

Member **Signature** : _____ **Date**: _____

Parent/Guardian: _____ Date: _____

PRIVACY POLICY

Federal law requires that once a year we inform you of our Privacy Policy. While you have probably received similar notices from banks, brokers, credit card companies, etc., we are going to explain our policy in very simple, easy to understand English.

The Seattle Police Athletic association (SPAA) collects certain personal information about you in order to complete a background check and complete the application process. This is done to ensure the safety and security of our members, the general public and the Association. The information is provided by you or obtained by the SPAA with your permission. We do not disclose any non-public information about you to anyone, except as permitted by law or with your permission. Access to your file and personal information is restricted to those SPAA employees who have a need to know. We maintain strict physical, electronic, and procedural safeguards to protect your personal information.