

Country Pond Fish & Game Club, Inc.

82 Pond St PO Box 124 Newton, NH 03858
603-352-5681 603-382-0062 www.cpfgc.com
A National Rifle Association Affiliated Organization



Club Range Use Application

Please fill in all spaces LEGIBLY. If any space is not applicable, please enter "N/A".
Bring the completed form to a Board of Directors meeting (or mail it to the above address, Att: BOD) at least 45 days prior to your event.
Please complete a separate form for each event or activity.

GROUP or ORGANIZATION: _____
You must attach proof of liability insurance coverage for your group.

CONTACT NAME: _____ TITLE (IF ANY): _____

ADDRESS: _____

CITY/TOWN: _____ STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____

ACTIVITY OR EVENT NAME: _____

REQUESTED DATE: _____ REQUESTED TIMES: FROM: _____ TO: _____

REQUESTED FACILITIES: INDOOR PISTOL RANGE ____ DOWNSTAIRS HALL ____ KITCHEN ____ OUTDOOR RIFLE RANGE ____
TRAP RANGE ____ MAIN HALL ____ INDOOR ARCHERY RANGE ____ OUTDOOR ARCHERY RANGE ____

ESTIMATED NUMBER OF PARTICIPANTS: _____
All participants must fill out and sign a Club Liability. Persons under 18 require signature of parent or legal guardian.

Note that any activity involving the use of firearms must be supervised by at least one Certified CPF&G Club Range Officer. Groups of six or more individuals may require additional Range Officers. This application will not be considered until you have obtained a firm commitment from one or more to supervise your event. (Enter names below.)
See <http://www.cpfgc.com/contacts.html> for Range Officer contact information.

CLUB RANGE OFFICER(S): NAME _____ NAME _____

WILL THE CLUB INCUR ANY COST FOR THIS ACTIVITY? NO ____ YES ____ IF "YES", PLEASE EXPLAIN

WILL THE CLUB RECEIVE ANY PROCEEDS FROM THIS ACTIVITY? NO ____ YES ____ IF "YES", PLEASE EXPLAIN

OTHER INFORMATION TO CONSIDER: _____

YOUR SIGNATURE: _____ DATE: _____

APPROVED DENIED
FOR BOARD OF DIRECTORS: _____ DATE: _____
RECOMMENDATIONS AND/OR RESTRICTIONS: _____
