

APL Gun Club Safety Acknowledgement Form

I have read and understand all of the AGC policy and procedures. I gave careful consideration to Section X: Range Rules and Section XI: Disciplinary Action. I understand that I am responsible for my actions and that I must practice safe gun handling procedures each and every time I am shooting, or participating in a shooting event at AGC or any other shooting facility.

My signature below is my acknowledgement of understanding the AGC policy and procedures and I will abide by the rules for safe handling of firearms.

Date (mm/dd/yyyy): _____

Printed Name: _____

Signature: _____