



Range Booking Register & Indemnity Form

2026-08-09

Date:	Y Y Y Y - M M - D D	Time In / Time Out:	H H : M M - H H : M M
Range(s):		Responsible Person:	
Arrival Checklist:	☐ Announce arrival (WhatsApp) ☐ Unlock main gate ☐ Unlock bathroom (optional) ☐ Range clean ☐ Flags present ☐ Medkit / fire extinguisher available	Departure Checklist:	☐ Range clean ☐ Lock bathroom (if opened) ☐ Lock main gate ☐ Announce departure (WhatsApp)
Remarks:			

Declaration: By signing this indemnity form, I agree to abide by the constitution, bylaws, and range rules of the Somerset West Pistol Club (SWPC). I hereby waive any claim against the SWPC, its committee members, safety marshals, club members, the City of Cape Town, or any associated parties for any loss, injury, or damages arising from my participation in or attendance of shooting activities on SWPC premises. This waiver extends to claims by myself, my estate, or my dependants.

Member Number ¹	Non-shooter ²	Name and Surname	ID Number (or Passport Number and Country)	Contact Number	Signature

¹SWPC membership number. Leave empty if not a member.

²Tick/indicate if not shooting e.g. range officer, instructor or spectator. Leave empty otherwise.