



# Laramie County Shooting Sports Complex

## YEARLY ACCESS APPLICATION AND AGREEMENT INSTRUCTIONS

13802 Bullseye Boulevard  
Cheyenne, Wyoming 82009  
(307) 775-7484

[shootingsports@laramiecounty.com](mailto:shootingsports@laramiecounty.com)  
<http://www.laramiecounty.com>

The undersigned hereby applies to become a Yearly Access User of Laramie County Shooting Sports Complex and provides the following information as part of his or her application for YEARLY ACCESS:

Primary User \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_  
First Name Last Name  
Home Address \_\_\_\_\_  
Number and Street City State Zip  
Mailing Address (if different) \_\_\_\_\_  
Number and Street City State Zip  
Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email address \_\_\_\_\_  
Driver's License # \_\_\_\_\_ State Issued \_\_\_\_ For Corporate Access Fee Users - Place of Employment \_\_\_\_\_

### FAMILY MEMBERS – spouse & children 21 and under in household

Name	Email Address	Date of Birth
_____/____/____	_____	____/____/____
_____/____/____	_____	____/____/____
_____/____/____	_____	____/____/____
_____/____/____	_____	____/____/____
_____/____/____	_____	____/____/____
_____/____/____	_____	____/____/____

### EMERGENCY CONTACTS

First Name	Last Name	Relationship
_____	_____	_____
Phone	_____	Phone
_____	_____	_____
Phone	_____	Phone
_____	_____	_____
Phone	_____	Phone

Are you a United States citizen? ☐ Yes ☐ No Have you ever been convicted of a felony? ☐ Yes ☐ No  
Are you ineligible for any reason to possess or use a firearm? ☐ Yes ☐ No  
Do you have a Wyoming Concealed Carry Permit? ☐ Yes ☐ No If yes: Number \_\_\_\_\_ Expiration Date \_\_\_\_\_  
Have you ever been in the military or law enforcement? ☐ Yes ☐ No If yes: Branch/PD \_\_\_\_\_ Date \_\_\_\_\_  
Are you retired from law enforcement or the military? ☐ Yes ☐ No If yes: Branch/PD \_\_\_\_\_ Date retired \_\_\_\_\_  
How did you hear about us? ☐ Newspaper ☐ Radio ☐ Drive By/Signage ☐ Mail/Flyer ☐ Internet search ☐ Website ☐ Referral  
Which of the following products/services interests you: ☐ Handguns ☐ Rifles ☐ Shotguns ☐ Training/Instruction ☐ Competition  
Have you completed any firearms instructional programs? ☐ Yes ☐ No If yes, which ones? \_\_\_\_\_

INITIATION FEE	YEARLY ACCESS TYPE PATRIOT (Police/Military) (active or full retirement)
<input type="checkbox"/> One Time \$50.00	<input type="checkbox"/> Individual \$150.00 yearly <input type="checkbox"/> Family \$200.00 yearly
<b>YEARLY ACCESS TYPE COUNTY RESIDENT</b> <input type="checkbox"/> Individual \$200.00 yearly <input type="checkbox"/> Family \$250.00 yearly <input type="checkbox"/> Junior \$60.00 yearly <input type="checkbox"/> Senior (60+) \$175.00 yearly <input type="checkbox"/> Senior Family \$225.00 yearly	<b>YEARLY ACCESS TYPE NON-COUNTY RESIDENT</b> <input type="checkbox"/> Individual \$250.00 yearly <input type="checkbox"/> Family \$300.00 yearly <input type="checkbox"/> Junior \$80.00 yearly
<b>YEARLY ACCESS TYPE COUNTY EMPLOYEE</b> <input type="checkbox"/> Individual \$150.00 yearly <input type="checkbox"/> Family \$200.00 yearly	<b>YEARLY ACCESS TYPE CORPORATE</b> <input type="checkbox"/> Chrome (8 singles) \$1200.00 yearly <input type="checkbox"/> Chrome Add-Ons #_____ \$150.00 yearly



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### YEARLY ACCESS APPLICATION AND AGREEMENT INSTRUCTIONS CONT'D

#### YEARLY ACCESS AND PAYMENT TERMS

To establish and qualify for Yearly Access, User agrees to pay an up-front initiation fee (the "Initiation Fee"). The Initiation Fee is a one-time charge and is non-refundable. Dues for Yearly Access selected are due in advance. The Yearly Access shall commence on the date LCSSC approves and accepts this Yearly Access Application.

#### ACCEPTANCE AND AGREEMENT

By executing this Yearly Access Application below, the undersigned acknowledges receipt of the attached Terms and Conditions of Yearly Access, which can also be found at the Laramie County Shooting Sports Complex website. If accepted for Yearly Access, the undersigned agrees to be fully bound by the terms thereof, as amended from time to time by LCSSC. The undersigned acknowledges and agrees that LCSSC reserves the right to change the Terms and Conditions of Yearly Access and all benefits and amenities associated therewith at any time. The undersigned hereby authorizes the disclosure and release of information to LCSSC for the purpose of investigating the undersigned's qualifications for Yearly Access and agrees that any third party may rely on this release. In the event of a breach of the Terms and Conditions of Yearly Access by the undersigned, his or her guests, or his or her family members (if a Family Yearly Access), the Yearly Access may be terminated by LCSSC, and the Initiation Fee and any prepaid dues shall not be refunded. The Yearly Access may be cancelled by the undersigned at any time upon at least 15 days written notice, and the Yearly Access Fee and any prepaid dues shall not be refunded. THE UNDERSIGNED AGREES TO RELEASE AND INDEMNIFY LCSSC AS SET FORTH IN THE TERMS AND CONDITION OF YEARLY ACCESS.

Primary User \_\_\_\_\_ / /  
Date

Adult User \_\_\_\_\_ / /  
Date

Adult User \_\_\_\_\_ / /  
Date

Adult User \_\_\_\_\_ / /  
Date

#### YEARLY ACCESS APPLICATION PAYMENT RECORD

Primary User \_\_\_\_\_ ☐ Individual ☐ Family User ID# \_\_\_\_\_  
First Name Last Name

Home Address \_\_\_\_\_  
Number and Street City State Zip

#### PAYMENT SUMMARY

Initiation Fee Paid \$ \_\_\_\_\_

YEARLY ACCESS FEE \$ \_\_\_\_\_

Total Paid on Joining \$ \_\_\_\_\_

#### METHOD OF PAYMENT

☐ Cash

☐ Check # \_\_\_\_\_

☐ Payment Date \_\_\_\_\_

**Checks should be made payable to: Laramie County Treasurer**