



# Mason-Dixon Clay Busters

*Be Safe, Have Fun, and Shoot Well*

Thank you for expressing an interest in the Mason-Dixon Clay Busters. The purpose of our program is to introduce youth to the shooting sports with an emphasis on safety, sportsmanship, and fun. Youth from 12 to 23 are eligible to participate. Our program is designed for youth who have never handled a firearm, to those with competition level experience.

## About our Program

Mason-Dixon currently participates in three shotgun shooting disciplines, Trap, Skeet & Sporting Clays. New members to the team, who are beginners, are asked to start with Trap. Experienced new members must have prior approval from Head Coach to participate in anything else. Sporting Clays is currently closed to new members and is only open to athletes who shot with us in 2016. (See below)

Let me emphasize, this is a team sport. Your teammates will be depending on you to attend the practices and competitions you sign up for. Commit to what you signed up for. Make sure you review the schedule and don't over extend yourself.

We are not a drop off program. Parents/Guardians are required to attend and help. Our organization operates with an all-volunteer team of adults. As we have grown, more help has been needed. Please make sure to volunteer in some manner. If everyone does one job/responsibility, and does it well, we will continue to improve and provide a quality shooting program.

## What's New?

We have made a few changes to our program for 2017. First, our Trap practices will move from Wednesday to Tuesday! We feel this is a positive move, one that will make our program available to many more families.

Secondly and I'm saying this with deep regret, we have closed our Sporting Clays division to new members. Only athletes who were on the team (Trap, Skeet, or Sporting) in 2016 will be allowed to register for Sporting Clays in 2017. This limited Sporting Clays division will run through the 2017 season however the discipline will be eliminated in 2018. As always, it comes down to finding a sufficient number of dedicated, qualified, volunteer coaches for each of our disciplines. If we don't have the coaches, we can't offer the discipline. If our situations changes, and we are able to acquire additional coaching, this all could change. If you, or anyone you know, would like become a volunteer coach please have them contact me at number/email listed below.

## About the Season

The 2017 spring season will begin on March 7, 2017 with a mandatory Team Meeting. Trap practices will be held on Tuesday, Skeet is on Thursday, and Sporting Clays on Saturday. Competitions are held on the weekends with the bulk of them coming in May and June. Attendance at our national championship in July is not mandatory; however, we welcome any and all athletes who would like to attend. Please refer to the website for our schedule and the latest information for each discipline.

## How to Register

- Begin by filling out **Page 1** of the 2016-17 Mason-Dixon Clay Busters Registration Package. Take care to select all of the disciplines you would like to participate in. Discipline costs include practice targets and competition fees. Ammunition is the athlete's responsibility. Don't forget to add all of the Required Memberships that your discipline(s) require. Finish Page 1 by totaling your selections.
- **Page 2** is the Mason-Dixon Clay Busters Consent & Waiver. Please make sure the participant **and** parent/guardian sign this page.
- **Page 3-6** is our SCTP paperwork. Make sure you select a shirt size on page 3.

Mail the completed and signed forms along with a check made payable to "Mason-Dixon Clay Busters" to 213 Pine Street, Glen Rock PA 17327. If you have any questions or need assistance please email [coach@masondixonclaybusters.com](mailto:coach@masondixonclaybusters.com) or call 717-235-0743.

# 2016-17 Mason-Dixon Clay Busters Registration Package

**Athletes Name:** \_\_\_\_\_

Begin by selecting the Discipline(s) you wish to register for. New members to the team, who are beginners, are asked to start with Trap. Experienced new members must have prior approval from Head Coach to participate in anything else.

This is a team sport. Your teammates will be depending on you to attend the practices and competitions you sign up for. Commit to what you signed up for. Make sure you review the schedule and don't over extend yourself.

Disciplines (Select the Disciplines you would like to participate in.*)		Cost	Total
<input type="checkbox"/>	<b>Trap</b> <ul style="list-style-type: none"> <li>• 8-10 Practices/Targets</li> <li>• PEN*MAR Trap Shoot</li> <li>• MD AIM Trap Championship</li> <li>• PA SCTP Trap Championship</li> <li>• PA AIM Trap Championship</li> </ul>	\$95.00	
<input type="checkbox"/>	<b>Skeet</b> <ul style="list-style-type: none"> <li>• 4-6 Practices/Targets</li> <li>• PEN*MAR Skeet Shoot</li> <li>• PA SCTP Skeet Championships</li> </ul>	\$65.00	
<input type="checkbox"/>	<b>Sporting Clays</b> - Closed to new members. Only open to athletes who were on the team (Trap, Skeet, or Sporting) in 2016 <ul style="list-style-type: none"> <li>• 7-9 Practices/Targets</li> <li>• PA SCTP Sporting Clays Championship</li> </ul>	\$110.00	

## Required Memberships

<input type="checkbox"/>	<b>SCTP Membership</b> (Required for ALL school ages athletes, 5th* through College, participating in <b>Trap, Skeet or Sporting Clays</b> . This may be only be omitted IF it was previously paid and turned in for the 2016 Fall Fun Trap League.)	\$20.00	
<input type="checkbox"/>	<b>ATA/AIM Membership</b> (Required if participating in the <b>Trap</b> , If not selected please attach PROOF that your membership is current and up-to-date)	\$25.00	
<input type="checkbox"/>	<b>NSCA or NSSA Membership</b> (Required if participating in the <b>Skeet or Sporting Clays</b> , If not selected please attach PROOF that your membership is current and up-to-date)	\$20.00	

Costs do not include ammunition. Grants typically supply some ammo however it is the athlete's responsibility to have ammunition available for all practices and competitions.

**Total**

Practice and Competition schedules are subject to change. Weather and scheduling conflicts may postpone and/or cancel some events. Every effort will be made to reschedule postponed events; however, refunds will not be given for events that are canceled.

The Coaches will use their discretion to make squadding determinations based on the intent to develop a successful team at large using the following criteria: classification, practice and competition attendance record, shooting average, conduct and demeanor of the athlete, and how a given group of athletes perform as a unit.

\* **Athletes under 12 years old** must receive prior approval from Head Coach. In addition, **athletes** age 18-23 who are not attending college, thus not eligible for the SCTP, must contact coach@masondixonclaybusters or 717-235-0743 to shoot **Trap** under the AIM program.

Fill out, sign, and mail all forms along with a check made payable to "**Mason-Dixon Clay Busters**" to **213 Pine Street, Glen Rock PA 17327**. If you have any questions or need assistance please email coach@masondixonclaybusters.com or call 717-235-0743.

## 2016-2017 Mason-Dixon Clay Busters Consent & Waiver

Athletes Name: \_\_\_\_\_  
Address \_\_\_\_\_ City, State & Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_ Gender \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Grade (Fall Semester 2016) \_\_\_\_\_ School \_\_\_\_\_  
Athletes E-mail address \_\_\_\_\_  
Have you completed a Hunter Safety Course? Yes or No  
Parent/Legal Guardian Name(s) \_\_\_\_\_  
Parent E-mail address \_\_\_\_\_

### LEGAL RELEASE FROM LIABILITY, WAIVER OF RIGHT TO SUE, AND HOLD HARMLESS AGREEMENT

I know that the use of firearms and target shooting are potentially hazardous activities involving a possible risk of serious bodily injury or death. I agree to abide by all range safety rules and any decision of the range officer or program provider relative to my ability to safely participate in live firing. I freely assume all risks associated with the use of firearms and target shooting equipment including risk of bodily injury or death or any other damage arising as a result of my participation, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of you accepting my participation, I, for myself, and, where applicable, my minor child, and anyone entitled to act on my behalf, hereby release from liability, waive any rights to sue and hold harmless the following: The Mason-Dixon Clay Busters, Inc., its employees, volunteers, program providers, and cooperating facilities from all claims or liabilities of any kind arising out of my participation. In case of an emergency, I hereby give my permission to the program employees and volunteers to administer or secure necessary first aid treatment, including emergency medical services for the below named participant and hereby expressly waive any and all claims of any nature arising from such treatment. In addition, hereby certify that I do not have a felony conviction which would make me ineligible to participate.

### PHOTO RELEASE

I hereby grant the Mason-Dixon Clay Busters, Inc. permission to use my likeness in a photograph in any and all of its publications, including website entries, without payment or any other consideration. I understand and agree that these materials will become the property of the Mason-Dixon Clay Busters, Inc. and will not be returned. I hereby irrevocably authorize the Mason-Dixon Clay Busters, Inc. to edit, alter, copy, exhibit, publish or distribute this photo for purposes of publicizing the Mason-Dixon Clay Busters, Inc. programs or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photograph. I hereby hold harmless and release and forever discharge the Mason-Dixon Clay Busters, Inc. from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

I have read this release before signing below and I fully understand the contents, meaning, and impact of this release.

\_\_\_\_\_  
(Participant Name – Please Print) (Participant Signature) (Date)

\_\_\_\_\_  
(Name of Parent/Guardian – Please Print) (Signature of parent/guardian of a minor) (Relationship)

Note: Guardian / Parental consent by signature is required for any participant under 18.



## Scholastic Clay Target Program 2016-17 Athlete Consent & Waiver



The **Scholastic Clay Target Program (SCTP®)** is sponsored by the Scholastic Shooting Sports Foundation (SSSF) and independent manufacturers and retailers in the shooting, hunting and outdoor trade industry (collectively, SCTP Sponsors). Joining SSSF in the SCTP is the National Shooting Sports Foundation (NSSF®), the National Skeet Shooting Association (NSSA), the National Sporting Clays Association (NSCA) and USA Shooting (USAS) which may also include their affiliated state associations (collectively, Governing Bodies).

**SCTP Season: September 1<sup>st</sup> – August 31<sup>st</sup>**

Team registration closes for the season 10 days prior to each discipline's SCTP State Championship OR June 1<sup>st</sup> – whichever comes first. **\*Coaches...Please read the bottom of this form!**

**Instructions:** Before you can participate in the SCTP, this Consent & Waiver must be completed, signed by you and your parent/legal guardian if you are under the age of 18, and returned to your Head coach to submit to SSSF Headquarters along with \$20 membership fee. **New Consent & Waiver forms must be completed at the beginning of each SCTP season. (Sept. 1)**

This **original** waiver form must be signed and returned to: SSSF / SCTP Headquarters, 165 Bay Ridge Lane, Burlington, WI 53105 and a copy should be retained by the head coach. **PLEASE** ensure that all emails are current.

Please read this form carefully, as it is a legal document that can affect your rights. *(Refer to the back of this form.)*

<b>Team Id:</b> 00000935		<b>Team Name:</b> Mason-Dixon Clay Busters	
<b>Name:</b>			
<b>Address:</b>			
<b>City:</b>		<b>State:</b>	<b>Zip:</b>
<b>Phone:</b>		<b>Scholastic Grade Level (Fall – 2016):</b>	
<b>Gender:</b> Male Female	<b>Birthdate:</b> __/__/__	<b>Shirt Size: (Adult) S – M – L – XL – 2X – 3X – 4X</b>	
<b>Most Commonly Used E-mail Address (parent/family):</b>			

**Coaches:** Athletes in the highest classification in any SCTP discipline must be classified in that same division for all disciplines for which they are registered. *(ref. SCTP Handbook)*

**Classification:**

- R – Rookie
  - IE – Intermediate / Entry Level
  - IA – Intermediate / Advanced
  - JV – Senior / Junior Varsity
  - V – Senior / Varsity
  - C – Collegiate
- L  Div. 1    Div. 2    Div. 3

**Disciplines:** (select all that apply.)

- |  |   |
|--|---|
| <input type="checkbox"/> American Trap (ATA)   | <input type="checkbox"/> Olympic Trap (Bunker)      |
| <input type="checkbox"/> American Skeet (NSSA) | <input type="checkbox"/> International Skeet (USAS) |
| <input type="checkbox"/> Sporting Clays (NSCA) | <input type="checkbox"/> Doubles Trap               |

**SCTP Athletes: If Member – must provide NGB Identification Numbers.**

**ATA** # \_\_\_\_\_ Class: \_\_\_\_\_      **NSSA** # \_\_\_\_\_ Class: \_\_\_\_\_  
**NSSA** # \_\_\_\_\_ Class: \_\_\_\_\_      **USAS** # \_\_\_\_\_ Class: \_\_\_\_\_

**Reminder:** NGB Memberships must be renewed each year before SCTP State Championships. All targets will be registered for Skeet, Sporting Clays, and USAS disciplines at State & National Championships.

**Athlete Start Year:** Fill in the year started in each SCTP discipline.

American Trap	American Skeet	Sporting Clays	Olympic Trap	Intl. Skeet	Doubles
<u>20</u>	<u>20</u>	<u>20</u>	<u>20</u>	<u>20</u>	<u>20</u>

Please Leave the Green Classification section blank

State Abbreviation: P A

Head Coach Last Name: Beardsley

**Parents & Athletes: Please Read Carefully**

In exchange for and as a condition of being allowed to participate in the SCTP, Athletes and Athlete’s parent/legal guardian (if Athlete is a minor child) agree as follows:

1. Athlete acknowledges that the SCTP is a team-based program that provides TEAM competitions in trap, skeet, sporting clays, Olympic Bunker Trap, and International Skeet which involve the use of firearms. Athlete further acknowledges that the SCTP emphasizes and REQUIRES the SAFE HANDLING and USE of firearms at ALL VENUES or LOCATIONS where firearms are present. Failure to adhere to this requirement may be grounds for removal from the SCTP
2. Athlete requests to participate knowing and understanding that there are risks and dangers associated with the use of firearms, including serious bodily injury, death and property damage. Athlete agrees to assume all risks, inherent or otherwise, that may occur due to, arise out of or be in connection with Athlete’s own participation, including without limitation the risk of serious bodily injury, death and property damage. Athlete further agrees to assume all risks, inherent or otherwise, that may occur due to, arise out of or be in connection with the participation of others in the SCTP, including without limitation other competitors; instructors / coaches; staff or volunteers of SSSF, SCTP Sponsors, or the Governing Bodies; and audience members.

**NOTE:** Please be advised that it is not possible to list all of the activities and related risks that Athlete may encounter by participating in the SCTP. There may be risks that are not known to Athlete, or to other athletes of the SCTP, including staff or volunteers of SSSF, SCTP Sponsors or the Governing Bodies, and may not be foreseen or reasonably foreseeable by anyone at this time or at the time of the activities in which Athlete participates. Athlete agrees to assume all risks of serious bodily injury, death and property damage, and all other risks of participation in the SCTP, whether or not described to Athlete. Athlete understands that there are risks and dangers associated with the use of firearms, including serious bodily injury, death and property damage. Athlete agrees to assume all risks of serious bodily injury, death and property damage that may occur due to, arising out of or in connection with Athlete’s own participation or the participation of others in the SCTP.

3. Athlete further covenants not to sue and agrees to release, waive, and discharge the SSSF, SCTP Sponsors and the Governing Bodies, and each of their respective directors, officers, employees, agents or volunteers (collectively, “Released Parties”), from any and all claims, demands, actions, suits, proceedings, liabilities, damages, losses, judgments and expenses (including reasonable attorney’s fees and costs) that Athlete may suffer, directly or indirectly, due to, arising out of or in connection with Athlete’s own participation or conduct (negligent or otherwise) in the SCTP or the conduct (negligent or otherwise) of other athletes in the SCTP, including without limitation, the conduct (negligent or otherwise) of the Released Parties.
4. To the fullest extent allowed by law, Athlete agrees to defend, indemnify and hold the SSSF, SCTP Sponsors and the Governing Bodies, and each of their respective directors, officers, employees, agents or volunteers, harmless from and against any and all claims, demands, actions, suits, proceedings, liabilities, damages, losses, judgments and expenses (including reasonable attorney’s fees and costs) by third parties (including Athlete’s own family) for any bodily injury, death or property damage or other incident occurring due to, arising out of or in connection with Athlete’s own participation or conduct (negligent or otherwise) in the SCTP.
5. Medical Attention: Athlete gives his/her consent to SSSF, Sponsors, the Governing Bodies and the host organization of any SCTP event to provide, through a medical staff of its choice, customary medical/athletic training attention, transportation and emergency services as warranted in the course of my participation in SCTP events.
6. Athlete grants to the SSSF, SCTP Sponsors and the Governing Bodies permission to reproduce, publish, distribute, or otherwise use in any reasonable manner Athlete’s name, photograph, likeness and statements in connection with the promotion of the SCTP, in all media, including, without limitation, the Internet, news articles, advertisements or other electronic or print materials. Athlete further covenants not to sue and agrees to waive, release and discharge the SSSF, SCTP Sponsors and the Governing Bodies, and all of their respective directors, officers, agents, employees and volunteers, from and against any and all claims, demands, actions, suits, proceedings, liabilities, damages, losses, judgments and expenses (including reasonable attorney’s fees and costs) arising out of or in connection with the use of Athlete’s name, photograph, likeness and statements, including, without limitation, any and all claims for invasion of privacy, publicity, defamation and/or portrayal in a false light, copyright infringement and any claims and/or demands for compensation or royalties.
7. Athlete’s signature below indicates that Athlete has read and fully understands this entire Consent & Waiver, and that it shall be binding upon Athlete, his representatives, heirs, assigns and next of kin.

**Parents/Legal Guardians**

8. As the parent or legal guardian of the Athlete, a minor child, I affirm that I have the authority to act on behalf of the Athlete and, as such, do hereby give my consent for the Athlete to participate in the SCTP. I declare that I have read and fully understand this entire Consent & Waiver, and that by signing below I agree that all of the provisions of this Consent & Waiver are equally binding upon me, my representatives, heirs, assigns and next of kin, as they are upon the Athlete.

*\*Athletes 18 years of age or older are not required to fill in the blue shaded area below, but DO NEED to sign the “Athlete’s Signature” below.*

<b>Parent / Legal Guardian Name:</b>		
<b>Address:</b>		
<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Phone:</b>	<b>E-Mail Address:</b>	
<b>Parent / Legal Guardian Signature:</b>		<b>Date:</b>
<b>Athlete’s Signature:</b>		<b>Date:</b>

**\*NOTE TO COACHES:** A completed copy of this Consent & Waiver Form for each team member must be in your possession prior to registering any athlete. **You must retain a copy of the consent form, mail the original copy with the original signature to SCTP Headquarters, \$20 per athlete and update athlete’s profile on-line yearly.** No athlete will be considered a SCTP Member until their completed consent form is entered on-line and on file at SCTP National Headquarters. **Coaches must comply with information requests from headquarters. Failure to produce the required information will result in removal from the program.**

**It is YOUR responsibility to verify that the classification information is correct.** If you determine there is an error in the information you have submitted, contact SCTP Headquarters immediately! No corrections to an athlete’s classification will be considered once the SCTP State Championship Squad Entry Form has been submitted (per discipline). If it is determined that the classification information is incorrect for a squadded athlete, the entire squad involved with the individual in question will be disqualified from participating in that discipline for the balance of the SCTP season.

**ALWAYS fill in your Team State abbreviation & your last name at the top of every form being submitted.**

State Abbreviation: P A

Head Coach Last Name: Beardsley



## Scholastic Clay Target Program 2016-17 Medical Consent Form



<b>Team Name:</b> Mason-Dixon Clay Busters		
<b>Athlete Name:</b>		
<b>Address:</b> (no PO Boxes)		
<b>City:</b>	<b>State:</b>	<b>Zip:</b>

In the event that the Athlete may require emergency medical care, or in the event Athlete may become ill, while participating in the Scholastic Clay Target Program, Athlete (and Athlete's parent/legal guardian if Athlete is a minor) hereby gives advanced consent to the Scholastic Shooting Sports Foundation, SCTP® Sponsors and Governing Bodies, including their respective volunteers, to provide, through a medical staff of their choice, necessary or advisable medical care and treatment to Athlete.

Athlete (and Athlete's parent/legal guardian if Athlete is a minor) further agree to pay any and all medical costs, expenses and charges and to release, waive, discharge and hold harmless the Scholastic Shooting Sports Foundation, SCTP® Sponsors and the Governing Bodies, and each of their respective directors, officers, employees, agents or volunteers, from and against any liability or any claim or demand arising from or connected with such medical care and treatment.

<b>Athlete Printed Name:</b>	
<b>Athlete Signature:</b>	<b>Date:</b>
<b>Parent / Legal Guardian Printed Name:</b>	
<b>Parent / Legal Guardian Signature:</b>	<b>Date:</b>

<b>Name:</b>		<b>Relationship To Athlete:</b>
<b>Address:</b>		
<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Home Phone:</b>	<b>Work Phone:</b>	<b>Cell Phone:</b>
<b>E-mail Address:</b>		

**! This form is to be retained by the Head Coach. DO NOT send this to Headquarters!**



State Abbreviation: 

P
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A
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Head Coach Last Name: Beardsley



## Scholastic Clay Target Program 2016-17 Sportsmanship Contract



The Scholastic Clay Target Program (SCTP) places a strong emphasis on sportsmanship and safety. As part of this effort, parents/guardians are asked to read and discuss the elements of this Sportsmanship Contract with their child athlete. This is a contract between the Scholastic Shooting Sports Foundation and the parent/guardian and his/her child. The signatures on this form signify agreement to comply with the provisions of this contract.

**IMPORTANT! A parent or guardian and his/her child (athlete) must sign and return THIS FORM along with a signed PARENTAL CONSENT FORM to the team's Head Coach.**

### **Parents:**

I understand the Scholastic Clay Target Program's first and foremost priority is safety. I will enforce the SCTP's safety standards with my child at all times. I will encourage my child and other team members to have fun. I will behave as a positive role model, respect the goals of the SCTP, and reinforce the character values of good sportsmanship, teamwork, and self-discipline. I agree to stay off the shooting field. Any problems or criticisms will be presented in a positive way to the coaches or a designated assistant. I will refrain from criticizing other shooters, coaches, using abusive language, or consuming alcohol or drugs before or during all SCTP activities that I attend. I understand that unsportsmanlike behavior on my part may result in me being asked to leave the area. Such actions on my part could also result in my child being disqualified or even removed from the SCTP.

By signing this form, I affirm that I have read and understand the behavioral standards for parents as stated above and the behavioral standards for my child as stated below, and that I agree to abide by the stipulations therein.

<b>Parent or Legal Guardian's Signature:</b>	<b>Date:</b>
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### **Athletes:**

I understand shooting on a SCTP team is a privilege. I agree to act responsibly and follow all safety rules while participating in the SCTP. I will encourage and support my teammates, cooperate and show respect to my coaches, and represent the team in a positive manner both at practices and in competition. I will set specific attainable goals, attend practices with a positive attitude, practice good sportsmanship at all times, and comport myself as a lady or gentleman at all times. I understand that unsportsmanlike behavior on my part may result in my disqualification and even expulsion from the SCTP. I will not lie, cheat, or steal nor tolerate those who do.

By signing this form, I affirm that I am academically eligible to participate in extra-curricular activities as set forth by my school, that I have read and understand the behavioral standards for athletes as stated above, and that I agree to abide by the stipulations therein.

<b>Athlete's Signature:</b>	<b>Date:</b>
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**! This form is to be retained by the Head Coach. DO NOT send this to Headquarters!**