

**Range Reservation Form**

**Agency:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Contact person:** \_\_\_\_\_ **Phone** \_\_\_\_\_ **email** \_\_\_\_\_

**Firearms Instructor(s)** \_\_\_\_\_

**Special Request** – any deviation from the Club’s standard Range Rules

\_\_\_\_\_

**Ranges reserved** \_\_\_\_\_

**Dates and Times** \_\_\_\_\_

\_\_\_\_\_

**Projected number of participants:** \_\_\_\_\_

**Will have target frames** \_\_\_\_\_ **Will purchase frames** \_\_\_\_\_  
**number** **total cost**

**Have gate key** \_\_\_\_\_ **Will need gate to be opened** \_\_\_\_\_

**Certificate listing BVRPC as an additional insured is enclosed** \_\_\_\_\_  
**is on file** \_\_\_\_\_

**(Does not apply to law enforcement or military)**

**Mail to:**  
**Beaver Valley Rifle and Pistol Club**  
**505 Constitution Blvd.**  
**Beaver Falls, PA 15010**