

Participant Liability Waiver

BRC Youth Summer Series May 5th, June 9th, June 30th, July 14th, & August 11th 2018

Parent Name:		Date of a	application:		
Email address:					
Phone Number:			umber:		
City:	Stat	e:	Zip Code:	Zip Code:	
Participant Name: _					
Please check events	of participation and	possible events for	throughout the ser	ries:	
Speed		Roping	Ro	ough Stock	
Straits		Break Away		Sr. Bulls	
Clover		Tie Down		Jr. Bulls	
Poles		Team Roping		Steers	
Goat Tie		Ribbon Roping			
agents, Mansfield Park, or the potential danger of the event affirm that my child is medica	my child is participating in. Ily mentally, and physically	I consent to all activities o capable of participation in	f each event for which my said activities.	child participates. I	
Date: Guardian Signature:_			·		
Notice: All horses participatir Coggins: Owner:	ng in this summer's a Horse's Name	activities must have		ns test on file.	
Accession #:				-	
Coggins:					
Owner:					
Accession #:	Date:	Lab:		<u>-</u>	
Coggins:					
Owner:					
Accession #:	Date:	Lab:		-	